# Case 17-80785 Doc 1 Filed 04/04/17 Entered 04/04/17 14:34:22 Desc Main Document Page 1 of 48

| Fill in this information to identify your case: |                               |                                   |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the:         |                               |                                   |
| NORTHERN DISTRICT OF ILLINOIS                   |                               |                                   |
| Case number (if known)                          | Chapter you are filing under: |                                   |
|   | ■ Chapter 7                   |                                   |
|   | ☐ Chapter 11                  |                                   |
|   | ☐ Chapter 12                  |                                   |
|   | ☐ Chapter 13                  | ☐ Check if this an amended filing |

### Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pai | rt 1:                 | Identify Yourself   |   |   |
|-----|-----------------------|---|---|---|
|     |                       |   | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case): |
| 1.  | You                   | r full name   |   |   |
|     | your<br>pictu<br>exar | e the name that is on<br>government-issued<br>ure identification (for<br>nple, your driver's<br>use or passport). | Alan First name  R.   | First name                                    |
|     | Bring<br>iden         | g your picture<br>tification to your<br>ting with the trustee.  | Middle name  Ries  Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III)      |
| 2.  |                       | other names you have<br>d in the last 8 years   |   |   |
|     |                       | ide your married or<br>den names.   |   |   |
| 3.  | you<br>num<br>Indi    | y the last 4 digits of<br>r Social Security<br>aber or federal<br>vidual Taxpayer<br>tification number            | xxx-xx-3874   |   |

Case 17-80785 Doc 1 Filed 04/04/17 Entered 04/04/17 14:34:22 Desc Main Document Page 2 of 48 Case number (if known)

Debtor 1 Alan R. Ries

|   | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |
|---|---|---|
| usiness names and<br>yer Identification<br>ers (EIN) you have<br>n the last 8 years<br>e trade names and<br>business as names | I have not used any business name or EINs.  Business name(s)  EINs  | ☐ I have not used any business name or EINs.  Business name(s)  EINs  |
| you live  |   | If Debtor 2 lives at a different address:   |
|   | Byron, IL 61010  Number, Street, City, State & ZIP Code  Ogle   | Number, Street, City, State & ZIP Code  County  |
|   | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.                                       | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.  |
|   | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code  |
| ou are choosing<br>istrict to file for<br>uptcy   | Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one:  ☐ Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)   |
|   | yer Identification ers (EIN) you have in the last 8 years e trade names and business as names  you live  ou are choosing strict to file for   | usiness names and yer Identification ers (EIN) you have in the last 8 years  Business name(s)  Business name(s)  EINs  Business name(s)  EINs  Business name(s)  EINs  Business name(s)  EINs  You live  802 Fieldcrest Drive Byron, IL 61010  Number, Street, City, State & ZIP Code  Ogle  County  If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.  Number, P.O. Box, Street, City, State & ZIP Code  Out are choosing strict to file for uptcy  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. |

Case 17-80785 Doc 1 Filed 04/04/17 Entered 04/04/17 14:34:22 Desc Main Document Page 3 of 48

Case number (if known) Debtor 1 Alan R. Ries

| ar         | t 2: Tell the Court About  | Your E     | 3ankruptcy Ca                 | ise                                 |  |   |   |  |
|------------|--|------------|-------------------------------|-------------------------------------|--|---|---|--|
| 7.         | The chapter of the Bankruptcy Code you are   |            |                               |                                     | n of each, see <i>Notice R</i> of page 1 and check the |   | § 342(b) for Individuals Fili   | ing for Bankruptcy                               |
|            | choosing to file under   |            | Chapter 7                     |                                     |  |   |   |  |
|            |  |            | Chapter 11                    |                                     |  |   |   |  |
|            |  |            | Chapter 12                    |                                     |  |   |   |  |
|            |  |            | Chapter 13                    |                                     |  |   |   |  |
|            |  |            |                               |                                     |  |   |   |  |
| 3.         | How you will pay the fee   |            | about how yo                  | u may pay. Ty<br>attorney is sub    | pically, if you are paying                             | g the fee yourself, you                           | clerk's office in your local or<br>I may pay with cash, cashi<br>torney may pay with a cred                                 | er's check, or money                             |
|            |  |            |                               |                                     | stallments. If you choos<br>nts (Official Form 103A).  |   | d attach the Application fo   | r Individuals to Pay                             |
|            |  |            | but is not requapplies to you | uired to, waive<br>ur family size a | your fee, and may do s<br>and you are unable to pa     | so only if your income<br>ay the fee in installme | u are filing for Chapter 7. E<br>is less than 150% of the o<br>nts). If you choose this opt<br>03B) and file it with your p | fficial poverty line that ion, you must fill out |
| <b>)</b> . | Have you filed for bankruptcy within the   | ■ N        | 0.                            |                                     |  |   |   |  |
|            | last 8 years?  | ☐ Y        | es.                           |                                     |  |   |   |  |
|            |  |            | District                      |                                     | When   |   |   |  |
|            |  |            | District                      |                                     | When   |   | Case number   |  |
|            |  |            | District                      |                                     | When   |   | Case number   |  |
| 10.        | Are any bankruptcy   | ■ N        | 0                             |                                     |  |   |   |  |
|            | cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | □ Y        | es.                           |                                     |  |   |   |  |
|            | annate:  |            | Debtor                        |                                     |  |   | Relationship to you   |  |
|            |  |            | District                      |                                     | When   |   | Case number, if known   | -  |
|            |  |            | Debtor                        |                                     | _  |   | Relationship to you   |  |
|            |  |            | District                      |                                     | When   |   | Case number, if known   |  |
| 11.        | Do you rent your   | ΠN         | o Go to li                    | ine 12.                             |  |   |   |  |
|            | residence?   | ■ Y        |                               | ur landlord ob                      | tained an eviction judgn                               | nent against you and o                            | do you want to stay in you  | residence?                                       |
|            |  | <b>—</b> 1 | es. ,                         | No. Go to line                      | , ,  | - ,   |   |  |
|            |  |            | ■                             | Yes. Fill out I                     | nitial Statement About a                               | an Eviction Judgment A                            | Against You (Form 101A) a   | and file it with this                            |
|            |  |            |                               | bankruptcy po                       | etition.   |   |   |  |

Document Page 4 of 48 Case number (if known) Debtor 1 Alan R. Ries Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? ☐ Yes. Name and location of business A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). ☐ Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard?

identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

Debtor 1 Alan R. Ries Document Page 5 of 48 Case number (if known)

### Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

| Deb  | tor 1 Alan R. Ries                                    |   | Document   | Paye 0 01 4                                | Case number (if       | known)   |  |
|--|---|---|--|--|-----------------------|--|--|
| Part   | 6: Answer These Quest                                 | ions for R  | eporting Purposes  |  |                       |  |  |
| 16.  | What kind of debts do you have?                       | 16a.  | Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by ar individual primarily for a personal, family, or household purpose."         |  |                       |  |  |
|  |   |   | ☐ No. Go to line 16b.  |  |                       |  |  |
|  |   |   | Yes. Go to line 17.  |  |                       |  |  |
|  |   | 16b.  | Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. |  |                       |  |  |
|  |   |   | ☐ No. Go to line 16c.  |  |                       |  |  |
|  |   |   | ☐ Yes. Go to line 17.  |  |                       |  |  |
|  |   | 16c.  | State the type of debts you owe th   | nat are not consumer                       | debts or business d   | ebts   |  |
| 17.  | Are you filing under Chapter 7?                       | □ No.   | I am not filing under Chapter 7. G   | o to line 18.                              |                       |  |  |
| Do you estimate that after any exempt property is excluded and |   | ■ Yes.  | are paid that funds will be availab  |  |                       | is excluded and administrative expenses  |  |
|  | administrative expenses are paid that funds will      |   | No   |  |                       |  |  |
|  | be available for distribution to unsecured creditors? |   | ☐ Yes  |  |                       |  |  |
|  | How many Creditors do you estimate that you           | <b>1</b> -49                                      |  | ☐ 1,000-5,000                              |                       | ☐ 25,001-50,000  |  |
|  | owe?  | □ 50-99<br>□ 100-199<br>□ 200-999                 |  | □ 5001-10,000<br>□ 10,001-25,000           |                       | ☐ 50,001-100,000<br>☐ More than100,000   |  |
| 19.  | How much do you estimate your assets to               | \$0 - \$  |  | □ \$1,000,001 - \$1                        |                       | \$500,000,001 - \$1 billion  |  |
|  | be worth?   | □ \$50,001 - \$100,000<br>□ \$100,001 - \$500,000 |  | □ \$10,000,001 - \$ □ \$50,000,001 - \$    |                       | ☐ \$1,000,000,001 - \$10 billion<br>☐ \$10,000,000,001 - \$50 billion            |  |
|  |   |   | 001 - \$1 million  | □ \$100,000,001 -                          | \$500 million         | ☐ More than \$50 billion   |  |
| 20.  | How much do you estimate your liabilities             | □ \$0 - \$  | 550,000  | <b>1</b> \$1,000,001 - \$1                 |                       | □ \$500,000,001 - \$1 billion  |  |
|  | to be?  | _   | 001 - \$100,000  | □ \$10,000,001 - \$<br>□ \$50,000,001 - \$ |                       | □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion               |  |
|  |   |   | .001 - \$500,000<br>.001 - \$1 million   | □ \$100,000,001 - \$                       |                       | ☐ More than \$50 billion   |  |
| D  | Olava Balava  |   | •  |  |                       |  |  |
| Part   |   | 11  | and and the market are and to declare.   |  |                       | San are stated to the san and a second   |  |
| For  | you   |   | kamined this petition, and I declare   | , , , ,                                    | ,                     | ·  |  |
|  |   |   | chosen to file under Chapter 7, I an tates Code. I understand the relief   |  |                       | der Chapter 7, 11,12, or 13 of title 11, se to proceed under Chapter 7.          |  |
|  |   |   | rney represents me and I did not pant, I have obtained and read the not  |  |                       | n attorney to help me fill out this  |  |
|  |   | I request   | relief in accordance with the chapt  | er of title 11, United S                   | States Code, specifie | ed in this petition.   |  |
|  |   | bankrupt<br>and 357                               | ccy case can result in fines up to \$201.  |  |                       | roperty by fraud in connection with a rs, or both. 18 U.S.C. §§ 152, 1341, 1519, |  |
|  |   | Alan R.   | R. Ries Ries e of Debtor 1   | Si   | gnature of Debtor 2   |  |  |
|  |   | Executed  | d on April 4, 2017   | Ex   | kecuted on            | DD / YYYY  |  |

Case 17-80785 Doc 1 Filed 04/04/17 Entered 04/04/17 14:34:22 Desc Main Document Page 7 of 48

Debtor 1 Alan R. Ries Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ Daniel A    | A. Springer            | Date          | April 4, 2017          |
|-----------------|------------------------|---------------|------------------------|
| Signature of    | Attorney for Debtor    |               | MM / DD / YYYY         |
|                 |                        |               |                        |
| Daniel A. S     | Springer               |               |                        |
| Printed name    |                        |               |                        |
| Springer L      | aw Firm                |               |                        |
| Firm name       |                        |               |                        |
| 2222 E Sta      | te St                  |               |                        |
| Suite 107       |                        |               |                        |
| Rockford,       | IL 61104               |               |                        |
| Number, Street, | City, State & ZIP Code |               |                        |
| Contact phone   | 815.312.4725           | Email address | dspringerlaw@gmail.com |
| 6314059         |                        |               |                        |
| Barnumbar & St  | ate                    |               |                        |

|                     |                          | Documer             | nt Page 8 of 48 |                                    |
|---------------------|--------------------------|---------------------|-----------------|------------------------------------|
| Fill in this infor  | mation to identify your  | case:               |                 |                                    |
| Debtor 1            | Alan R. Ries             |                     |                 |                                    |
|                     | First Name               | Middle Name         | Last Name       |                                    |
| Debtor 2            |                          |                     |                 |                                    |
| (Spouse if, filing) | First Name               | Middle Name         | Last Name       |                                    |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT O | FILLINOIS       |                                    |
| Case number         |                          |                     |                 |                                    |
| (if known)          |                          |                     |                 | Check if this is an amended filing |
|                     |                          |                     |                 |                                    |

### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

#### Part 1: Summarize Your Assets Your assets Value of what you own Schedule A/B: Property (Official Form 106A/B) 0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... 1b. Copy line 62, Total personal property, from Schedule A/B..... 41,732.87 1c. Copy line 63, Total of all property on Schedule A/B..... 41,732.87 Part 2: Summarize Your Liabilities Your liabilities Amount you owe Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 33.325.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D... Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 0.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F..... 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F..... 42,973.10 Your total liabilities 76.298.10 Part 3: Summarize Your Income and Expenses Schedule I: Your Income (Official Form 106I) 4,295.44 Copy your combined monthly income from line 12 of Schedule I..... Schedule J: Your Expenses (Official Form 106J) 4,208.60 Copy your monthly expenses from line 22c of Schedule J..... Part 4: Answer These Questions for Administrative and Statistical Records Are you filing for bankruptcy under Chapters 7, 11, or 13? □ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

the court with your other schedules.

Official Form 106Sum Summary of You

Summary of Your Assets and Liabilities and Certain Statistical Information

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

page 1 of 2

Desc Main Entered 04/04/17 14:34:22 Doc 1 Filed 04/04/17 Case 17-80785 Document

Page 9 of 48 Case number (if known) Debtor 1 Alan R. Ries

| 8. | From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form |
|----|--|
|    | 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.                              |

5,583.46 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total cla | im   |
|--|-----------|------|
| From Part 4 on Schedule E/F, copy the following:   |           |      |
| 9a. Domestic support obligations (Copy line 6a.)   | \$        | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$        | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$        | 0.00 |
| 9d. Student loans. (Copy line 6f.)   | \$        | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$        | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$       | 0.00 |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$        | 0.00 |

| Fill in this ir                 | nformation to identify your  | case and this filing:  | II Paue 10 01 46   |                               |   |
|---------------------------------|--|--|--|-------------------------------|---|
| Debtor 1                        | Alan R. Ries   |  |  |                               |   |
| <b>D</b> 14 0                   | First Name   | Middle Name  | Last Name  |                               |   |
| Debtor 2<br>(Spouse, if filing) | First Name   | Middle Name  | Last Name  |                               |   |
| United States                   | s Bankruptcy Court for the:  | NORTHERN DISTRICT O  | F ILLINOIS   |                               |   |
| Case numbe                      |  |  |  |                               | П о   |
| Case numbe                      |  |  |  |                               | ☐ Check if this is an amended filing                        |
|                                 |  |  |  |                               | _   |
| Official                        | Form 106A/B  |  |  |                               |   |
| _                               | ule A/B: Prop  | erty   |  |                               | 12/15   |
| hink it fits bes                | st. Be as complete and accura<br>more space is needed, attach                                    | ate as possible. If two married  | ce. If an asset fits in more than<br>people are filing together, both<br>On the top of any additional pa | are equally responsible for s | upplying correct  |
| Part 1: Desc                    | ribe Each Residence, Building  | g, Land, or Other Real Estate \  | ou Own or Have an Interest In  |                               |   |
| . Do you owr                    | n or have any legal or equitable   | e interest in any residence, bu  | ilding, land, or similar property  | r?                            |   |
| ■ No. Go to                     | o Part 2.  |  |  |                               |   |
|                                 | ere is the property?   |  |  |                               |   |
|                                 |  |  |  |                               |   |
| Part 2: Desc                    | ribe Your Vehicles   |  |  |                               |   |
|                                 | •  | tility vehicles, motorcycles   | e G: Executory Contracts and   | ·                             |   |
| 3.1 Make:                       | Jeep   | Who has an interes   | st in the property? Check one  |                               | laims or exemptions. Put                                    |
| Model:                          | Wrangler Sahara  | Debtor 1 only  | on the property consensus  |                               | ed claims on Schedule D:<br>ims Secured by Property.        |
| Year:                           | 2013   | Debtor 2 only  |  | Current value of the          | Current value of the  |
|                                 |  | ,000 Debtor 1 and De   | •  | entire property?              | portion you own?  |
| Other                           | information:   | At least one of th   | e debtors and another  |                               |   |
|                                 |  | Check if this is (see instructions)  | community property   | \$26,275.00                   | \$26,275.00   |
| Examples:  No Yes  Add the c    | Boats, trailers, motors, persons to the portion state of the portion state of the portion state. | onal watercraft, fishing vess you own for all of your ent . Write that number here | I vehicles, other vehicles, a els, snowmobiles, motorcycle   | accessories any entries for   | \$26,275.00   |
|                                 | ribe Your Personal and Hous<br>or have any legal or equit  | ehold Items able interest in any of the  | following items?   |                               | Current value of the portion you own? Do not deduct secured |

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Schedule A/B: Property Official Form 106A/B

Official Form 106A/B

Schedule A/B: Property

Case 17-80785 Doc 1 Filed 04/04/17 Entered 04/04/17 14:34:22 Desc Main Document Page 12 of 48 Case number (if known)

Debtor 1 Alan R. Ries 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1.090.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No ■ Yes.... Cash \$5.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... \$160.00 17.1. Checking **Chase Bank** 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: 401(k) \$14,192.87 **Current Employer** 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others No Institution name or individual: ☐ Yes. ..... 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) ■ No ☐ Yes..... Issuer name and description.

Page 13 of 48

Case number (if known) Document Debtor 1 Alan R. Ries 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements ■ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ■ No ☐ Yes. Give specific information...... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Yes. Name the insurance company of each policy and list its value. Surrender or refund Company name: Beneficiary: value: **Current Employer Karen Nicholson** \$0.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims

No

Case 17-80785

Doc 1

Filed 04/04/17

Entered 04/04/17 14:34:22

Desc Main

|  | Case 17-80785   | Doc 1   | Filed 04/04/17<br>Document        | Entered 04/04/17 14:34:22 Page 14 of 48 Case number (if known) | Desc Main  |
|--|---|---|-----------------------------------|--|--|
| Debtor 1   | Alan R. Ries  |   |                                   | Case number (if known)   |  |
| ☐ Yes.   | Describe each claim   |   |                                   |  |  |
| -  | nancial assets you did not  | already list  |                                   |  |  |
| ■ No<br>□ Yes.   | Give specific information   |   |                                   |  |  |
|  |   |   |                                   |  |  |
|  |   |   |                                   | ny entries for pages you have attached                         | \$14,357.87  |
| Part 5: De   | scribe Any Rusiness-Related   | Property You  | Own or Have an Interest           | In. List any real estate in Part 1.                            |  |
|  | own or have any legal or equi   |   |                                   |  |  |
|  | o to Part 6.  | itable interest   | iii aiiy busiiiess-reialeu p      | roperty?   |  |
| Yes. C   | Go to line 38.  |   |                                   |  |  |
|  |   |   |                                   |  | Current value of the portion you own?  Do not deduct secured claims or exemptions. |
| 38. Accou  | nts receivable or commis  | sions you alr   | eady earned                       |  |  |
| ■ No   | Describe  |   |                                   |  |  |
| □ res.   | Describe  |   |                                   |  |  |
|  | equipment, furnishings, a ples: Business-related comp   |   | re, modems, printers, c           | opiers, fax machines, rugs, telephones, desks                  | , chairs, electronic devices   |
| _ :::  | Describe  |   |                                   |  |  |
|  |   |   |                                   |  |  |
| _ 100.   |   |   |                                   |  |  |
|  |   | Supplies  |                                   |  | \$10.00  |
| 40. Machir   |   |   | ı use in business, and            | tools of your trade  | \$10.00  |
| 40. <b>Machi</b> r ■ No  | Office \$   |   | ı use in business, and            | tools of your trade  | \$10.00  |
| 40. <b>Machir</b> ■ No □ Yes.  | Office somery, fixtures, equipment, Describe  |   | ı use in business, and            | tools of your trade  | \$10.00  |
| 40. <b>Machi</b> r ■ No  | Office somery, fixtures, equipment, Describe  |   | ı use in business, and            | tools of your trade  | \$10.00  |
| 40. <b>Machin</b> ■ No □ Yes.  41. <b>Invento</b> ■ No                               | Office somery, fixtures, equipment, Describe  |   | ı use in business, and            | tools of your trade  | \$10.00  |
| 40. Machin ■ No □ Yes.  41. Invento ■ No □ Yes.  42. Interes                         | Office States, equipment,  Describe   | supplies you  | ı use in business, and            | tools of your trade  | \$10.00  |
| 40. Machir No Yes.  41. Invento No Yes.  42. Interes                                 | Office states of partnerships or joint  | supplies you  |                                   | tools of your trade  | \$10.00  |
| 40. Machir No Yes.  41. Invento No Yes.  42. Interes                                 | Office States, equipment, Describe  Describe  Describe  Give specific information a   | supplies you  |                                   | tools of your trade % of ownership:                            | \$10.00  |
| 40. Machir ■ No □ Yes.  41. Invento ■ No □ Yes.  42. Interes ■ No □ Yes.  43. Custor | Office States, equipment, Describe  Describe  Describe  Give specific information a   | supplies you t ventures bout them e of entity:              |                                   |  | \$10.00  |
| 40. Machir No Yes.  41. Invento No Yes.  42. Interes No Yes.  43. Custor No.         | Office statement, fixtures, equipment, Describe  Describe  Describe  Give specific information a Namer lists, mailing lists, or second contents.  | supplies you t ventures bout them e of entity:              | ations                            | % of ownership:  | \$10.00  |
| 40. Machir No Yes.  41. Invento No Yes.  42. Interes No Yes.  43. Custor No.         | Office statement, fixtures, equipment, Describe  Describe  Describe  Sts in partnerships or joint Give specific information a Nam mer lists, mailing lists, or our lists include personally ide | supplies you t ventures bout them e of entity:              | ations                            | % of ownership:  | \$10.00  |
| 40. Machir No Yes.  41. Invento No Yes.  42. Interes No Yes.  43. Custor No. Do you  | Office statement, fixtures, equipment, Describe  Describe  Describe  Give specific information a Namer lists, mailing lists, or second contents.  | supplies you t ventures bout them e of entity:              | ations                            | % of ownership:  | \$10.00  |
| 40. Machir No Yes.  41. Invente No Yes.  42. Interes No Yes.  43. Custor No. Do you  | Office States, equipment, Describe  Describe  Ory  Describe  Give specific information a Namer lists, mailing lists, or our lists include personally ide  No                                    | supplies you t ventures bout them e of entity: other compil | ations nation (as defined in 11 U | % of ownership:  | \$10.00  |

Official Form 106A/B Schedule A/B: Property page 5

Case 17-80785 Doc 1 Filed 04/04/17 Entered 04/04/17 14:34:22 Desc Main Page 15 of 48

Case number (if known) Document Debtor 1 Alan R. Ries 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached \$10.00 for Part 5. Write that number here...... Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$26,275.00 Part 3: Total personal and household items, line 15 57. \$1,090.00 Part 4: Total financial assets, line 36 \$14,357.87 59. Part 5: Total business-related property, line 45 \$10.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00

\$0.00

Copy personal property total

\$41,732.87

Official Form 106A/B Schedule A/B: Property page 6

Part 7: Total other property not listed, line 54

62. Total personal property. Add lines 56 through 61...

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$41,732.87

\$41,732.87

|                     |                          |                   | III FAUE 10 UI 40 | () |
|---------------------|--------------------------|-------------------|-------------------|----|
| Fill in this infor  | mation to identify your  | case:             |                   |    |
| Debtor 1            | Alan R. Ries             |                   |                   |    |
|                     | First Name               | Middle Name       | Last Name         |    |
| Debtor 2            |                          |                   |                   |    |
| (Spouse if, filing) | First Name               | Middle Name       | Last Name         |    |
| United States Ba    | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS       |    |
| Case number         |                          |                   |                   |    |
| (if known)          |                          |                   |                   |    |
|                     |                          |                   |                   |    |

### Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| 1. | Which set of exem | ptions are | you claiming? | Check one only | , even if | your spouse is | filing with | vou. |
|----|-------------------|------------|---------------|----------------|-----------|----------------|-------------|------|
|----|-------------------|------------|---------------|----------------|-----------|----------------|-------------|------|

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on<br>Schedule A/B that lists this property |   | Current value of the portion you own | Amo | ount of the exemption you claim                                 | Specific laws that allow exemption |
|--|---|--------------------------------------|-----|---|------------------------------------|
|  |   | Copy the value from<br>Schedule A/B  | Che | eck only one box for each exemption.                            |                                    |
|  | Household Furniture Line from Schedule A/B: 6.1     | \$220.00                             | •   | \$220.00  | 735 ILCS 5/12-1001(b)              |
|  | Elite Hoff Governor 775.                            |                                      |     | 100% of fair market value, up to any applicable statutory limit |                                    |
|  | 2 TV's, Laptop Computer Line from Schedule A/B: 7.1 | \$250.00                             |     | \$250.00  | 735 ILCS 5/12-1001(b)              |
|  | Line Horr Schedule A.B. 1.1                         |                                      |     | 100% of fair market value, up to any applicable statutory limit |                                    |
|  | Pictures, CD Collection, Various Collectibles       | \$120.00                             |     | \$120.00  | 735 ILCS 5/12-1001(b)              |
|  | Line from Schedule A/B: 8.1                         |                                      |     | 100% of fair market value, up to any applicable statutory limit |                                    |
|  | Paintball Equipment Line from Schedule A/B: 9.1     | \$200.00                             |     | \$200.00  | 735 ILCS 5/12-1001(b)              |
|  | Line Horr Schedule A.B. 3.1                         |                                      |     | 100% of fair market value, up to any applicable statutory limit |                                    |
|  | Used Clothing Line from Schedule A/B: 11.1          | \$300.00                             |     | \$300.00  | 735 ILCS 5/12-1001(a)              |
|  | Line Irom Scriedule A/B: 11.1                       |                                      |     | 100% of fair market value, up to any applicable statutory limit |                                    |

Case 17-80785 Doc 1 Filed 04/04/17 Entered 04/04/17 14:34:22 Desc Main Document Page 17 of 48

an R. Ries

Case number (if known)

Debtor 1 Alan R. Ries Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Cash 735 ILCS 5/12-1001(b) \$5.00 \$5.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit **Checking: Chase Bank** 735 ILCS 5/12-1001(b) \$160.00 \$160.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit 401(k): Current Employer 735 ILCS 5/12-1006 100% \$14,192.87 Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit Office Supplies 735 ILCS 5/12-1001(b) \$10.00 \$10.00 Line from Schedule A/B: 39.1 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

|                             | Case   | 17-80785  | Doc 1 Filed 04/04/17  Document   | Entered<br>Page 18            | d 04/04/17 14:34<br>of 48  | 4:22 Desc M<br>_                                   | lain                        |
|-----------------------------|--|---|--|-------------------------------|--|--|-----------------------------|
| Fill                        | in this information  | on to identify yo   | ur case:   |                               |  |  |                             |
| Deb                         | -  | Alan R. Ries  | Middle Name  | Last Name                     |  |  |                             |
|                             | otor 2<br>use if, filing)  | irst Name   | Middle Name  | Last Name                     |  |  |                             |
| Uni                         | ted States Bankru  | ptcy Court for the  | : NORTHERN DISTRICT OF ILLIN   | NOIS                          |  |  |                             |
|                             | se number  |   |  |                               |  | _  | if this is an<br>ded filing |
|                             | icial Form 1<br>hedule D:  |   | s Who Have Claims S  | ecured                        | by Property  |  | 12/15                       |
| s ne                        |  |   | If two married people are filing together, out, number the entries, and attach it to   |                               |  |  |                             |
| . Do                        | any creditors have   | e claims secured b  | y your property?   |                               |  |  |                             |
|                             | ☐ No. Check this   | box and submit  | his form to the court with your other so   | chedules. Yo                  | u have nothing else to   | report on this form.                               |                             |
|                             | ■ Yes. Fill in all o   | of the information  | helow  |                               | ŭ  | •  |                             |
| Dor                         |  |   | 20.011.  |                               |  |  |                             |
|                             |  |   |  |                               |  |  |                             |
|                             |  | cured Claims  |  |                               | Column A   | Column B   | Column C                    |
| <b>2. L</b> for e           | ist all secured clain<br>each claim. If more t   | ns. If a creditor has han one creditor ha   | more than one secured claim, list the credit<br>s a particular claim, list the other creditors in<br>ical order according to the creditor's name.  |                               | Amount of claim Do not deduct the                                  | Value of collateral that supports this             | Unsecured portion           |
| <b>2. L</b> for e           | ist all secured clain<br>each claim. If more t   | ns. If a creditor has han one creditor has claims in alphabet   | s a particular claim, list the other creditors in  | n Part 2. As                  | Amount of claim Do not deduct the                                  | Value of collateral                                | Unsecured                   |
| 2. L<br>for e               | ist all secured claim<br>each claim. If more the as possible, list the<br>OneMain Fina<br>Creditor's Name  | ns. If a creditor has<br>han one creditor ha:<br>e claims in alphabet<br>ancial   | s a particular claim, list the other creditors in<br>ical order according to the creditor's name.  | e claim:                      | Amount of claim Do not deduct the value of collateral.             | Value of collateral<br>that supports this<br>claim | Unsecured portion If any    |
| 2. L<br>for e               | ist all secured clain<br>each claim. If more thas possible, list the   | ns. If a creditor has<br>han one creditor ha<br>e claims in alphabet<br>ancial<br>ptcy Dept.                              | s a particular claim, list the other creditors in ical order according to the creditor's name.  Describe the property that secures the 2013 Jeep Wrangler Sahara 50 miles  As of the date you file, the claim is: Chapply.   | e claim:                      | Amount of claim Do not deduct the value of collateral.             | Value of collateral<br>that supports this<br>claim | Unsecured portion If any    |
| 2. L<br>for e               | ist all secured clain each claim. If more that as possible, list the  OneMain Fina Creditor's Name  Attn: Bankrup PO Box1010   | ns. If a creditor has han one creditor has e claims in alphabet ancial  ptcy Dept.  | s a particular claim, list the other creditors in ical order according to the creditor's name.  Describe the property that secures the 2013 Jeep Wrangler Sahara 50 miles  As of the date you file, the claim is: Chapply.  Contingent Unliquidated Disputed   | e claim:                      | Amount of claim Do not deduct the value of collateral.             | Value of collateral<br>that supports this<br>claim | Unsecured portion If any    |
| 2. L<br>for 6<br>muc        | ist all secured claim each claim. If more that as possible, list the  OneMain Fina Creditor's Name  Attn: Bankrup PO Box1010 Evansville, IN  | ns. If a creditor has han one creditor has e claims in alphabet ancial  otcy Dept.  1 47706  State & Zip Code             | s a particular claim, list the other creditors in ical order according to the creditor's name.  Describe the property that secures the 2013 Jeep Wrangler Sahara 50 miles  As of the date you file, the claim is: Chapply.  Contingent Unliquidated  | e claim:                      | Amount of claim Do not deduct the value of collateral.             | Value of collateral<br>that supports this<br>claim | Unsecured portion If any    |
| 2. L for e muco             | ist all secured claim each claim. If more that as possible, list the  OneMain Fina Creditor's Name  Attn: Bankrup PO Box1010 Evansville, IN  Number, Street, City,   | ns. If a creditor has han one creditor has e claims in alphabet ancial  otcy Dept.  1 47706  State & Zip Code             | s a particular claim, list the other creditors in ical order according to the creditor's name.  Describe the property that secures the 2013 Jeep Wrangler Sahara 50 miles  As of the date you file, the claim is: Chapply.  Contingent Unliquidated Disputed   | e claim: 0,000                | Amount of claim Do not deduct the value of collateral. \$33,325.00 | Value of collateral<br>that supports this<br>claim | Unsecured portion If any    |
| 2. L<br>for e<br>muc<br>2.1 | ist all secured claim and claim. If more that as possible, list the one of the secured claim. If more that as possible, list the one of the secure of the se | ns. If a creditor has han one creditor has e claims in alphabet ancial  ptcy Dept.  I 47706  State & Zip Code  Check one. | s a particular claim, list the other creditors in ical order according to the creditor's name.  Describe the property that secures the 2013 Jeep Wrangler Sahara 50 miles  As of the date you file, the claim is: Chapply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mo  | e claim: 0,000  neck all that | Amount of claim Do not deduct the value of collateral. \$33,325.00 | Value of collateral<br>that supports this<br>claim | Unsecured portion If any    |
| 2. L for € muco             | ist all secured claim and claim. If more that as possible, list the one of the secured claim. If more that as possible, list the one of the secure of the se | ns. If a creditor has han one creditor has e claims in alphabet ancial  ptcy Dept.  I 47706  State & Zip Code  Check one. | s a particular claim, list the other creditors in ical order according to the creditor's name.  Describe the property that secures the 2013 Jeep Wrangler Sahara 50 miles  As of the date you file, the claim is: Chapply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mo car loan)  | e claim: 0,000  neck all that | Amount of claim Do not deduct the value of collateral. \$33,325.00 | Value of collateral<br>that supports this<br>claim | Unsecured portion If any    |
| <b>Wh</b> □ [ □ ]           | ist all secured claim and claim. If more that as possible, list the one of the secured claim. If more that as possible, list the one of the secure of the se | ns. If a creditor has han one creditor has e claims in alphabet ancial  ptcy Dept. I 47706  State & Zip Code  Check one.  | s a particular claim, list the other creditors in ical order according to the creditor's name.  Describe the property that secures the 2013 Jeep Wrangler Sahara 50 miles  As of the date you file, the claim is: Chapply.  Contingent Unliquidated Disputed Nature of lien. Check all that apply.  An agreement you made (such as mo car loan) Statutory lien (such as tax lien, mechal | e claim: 0,000  neck all that | Amount of claim Do not deduct the value of collateral. \$33,325.00 | Value of collateral<br>that supports this<br>claim | Unsecured portion If any    |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$33,325.00

If this is the last page of your form, add the dollar value totals from all pages.

Write that number here:

\$33,325.00

#### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

| `  | Sase 11-00105 1  | Document  | Page 19 of 48  | 22 Desc Main                           |
|--|--|---|--|--|
| Fill in this inf                                       | ormation to identify your  |   |  |  |
| Debtor 1   | Alan R. Ries   |   |  |  |
| Debter 1   | First Name   | Middle Name   | Last Name  |  |
| Debtor 2   |  |   |  |  |
| (Spouse if, filing)                                    | First Name   | Middle Name   | Last Name  |  |
| United States  | Bankruptcy Court for the:  | NORTHERN DISTRICT OF I  | LLINOIS  |  |
| Case number  |  |   |  |  |
| (if known)   |  |   |  | ☐ Check if this is an                  |
|  |  |   |  | amended filing                         |
| Official Ec  | orm 106E/F   |   |  |  |
|  |  | lha Haya Unagayra   | d Claims   | 12/15                                  |
|  |  | ho Have Unsecured   | Q CIAITIS RITY claims and Part 2 for creditors with NONP   | 12/15                                  |
| Schedule D: Cre<br>left. Attach the (<br>name and case | editors Who Have Claims Sec<br>Continuation Page to this pag<br>number (if known). | ured by Property. If more space is<br>ge. If you have no information to r | <ul> <li>Do not include any creditors with partially set<br/>is needed, copy the Part you need, fill it out, nu<br/>report in a Part, do not file that Part. On the top</li> </ul> | umber the entries in the boxes on the  |
| Part 1: Lis  | t All of Your PRIORITY Ur  | secured Claims  |  |  |
| 1. Do any cre  | ditors have priority unsecure  | d claims against you?   |  |  |
| No. Go   | to Part 2.   |   |  |  |
| ☐ Yes.   |  |   |  |  |
| Part 2: Lis  | t All of Your NONPRIORIT   | Y Unsecured Claims  |  |  |
| 3. Do any cre  | ditors have nonpriority unsec  | cured claims against you?   |  |  |
| ☐ No. You  | have nothing to report in this p   | art. Submit this form to the court wit                                    | th your other schedules.   |  |
| Yes.   |  |   | ·  |  |
| unsecured  | claim, list the creditor separatel   | y for each claim. For each claim liste                                    | the creditor who holds each claim. If a creditor ed, identify what type of claim it is. Do not list clair u have more than three nonpriority unsecured clai                        | ms already included in Part 1. If more |
|  |  |   |  | Total claim                            |
| 4.1 <b>Ame</b>   | rican Express  | Last 4 digits of ac   | ccount number  | \$1,380.00                             |
| •  | ority Creditor's Name  | When was the de   | ebt incurred? 12/2016  |  |
|  | iso, TX 79998  |   |  |  |
|  | er Street City State Zlp Code  | As of the date you  | u file, the claim is: Check all that apply   |  |
| _  | ncurred the debt? Check one.   | _   |  |  |
| _  | btor 1 only  | Contingent  |  |  |
|  | btor 2 only  | Unliquidated  |  |  |
| ☐ Del  | btor 1 and Debtor 2 only   | ☐ Disputed  |  |  |
| ☐ At I   | east one of the debtors and an   | ouici   | ORITY unsecured claim:   |  |
|  | eck if this claim is for a com   | _   |  |  |
| debt<br>Is the   | claim subject to offset?   | ☐ Obligations aris  | sing out of a separation agreement or divorce that<br>laims  | t you did not                          |
| ■ No   |  |   | on or profit-sharing plans, and other similar debts  |  |
| □ Yes  | 3  | ·   | Credit Card Purchases  |  |
| <b>—</b> 163   | •  | <ul> <li>Other. Specify</li> </ul>  |  |  |

Case 17-80785 Doc 1 Filed 04/04/17 Entered 04/04/17 14:34:22 Desc Main Document Page 20 of 48 Case number (if know)

| Alan K. Kies   | Case number (if know)   |             |
|--|---|-------------|
| Barclay's Bank Delaware Nonpriority Creditor's Name                  | Last 4 digits of account number   | \$6,800.00  |
| Attn: Bankruptcy Dept. PO Box 8803                                   | When was the debt incurred? 12/2013   |             |
| Wilmington, DE 19899  Number Street City State Zlp Code              | As of the date you file, the claim is: Check all that apply   |             |
| Who incurred the debt? Check one.                                    | As of the date you me, the diamnis. Oneek all that apply  |             |
| ■ Debtor 1 only  | ☐ Contingent  |             |
| Debtor 2 only  | ☐ Unliquidated  |             |
| ☐ Debtor 1 and Debtor 2 only   | □ Disputed  |             |
| ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured claim:  |             |
| ☐ Check if this claim is for a community                             | ☐ Student loans   |             |
| debt<br>Is the claim subject to offset?                              | Obligations arising out of a separation agreement or divorce that you did not report as priority claims   |             |
| ■ No   | $\square$ Debts to pension or profit-sharing plans, and other similar debts                               |             |
| Yes  | ■ Other. Specify Credit Card Purchases  |             |
| Borrowers First Inc  | Last 4 digits of account number   | \$11,514.10 |
| Nonpriority Creditor's Name 1114 Lost Creek BV 220 Austin, TX 78746  | When was the debt incurred? 04/2016   |             |
| Number Street City State Zlp Code Who incurred the debt? Check one.  | As of the date you file, the claim is: Check all that apply   |             |
| Debtor 1 only  | ☐ Contingent  |             |
| ☐ Debtor 2 only  | ☐ Unliquidated  |             |
| ☐ Debtor 1 and Debtor 2 only   | ☐ Disputed  |             |
| $\square$ At least one of the debtors and another                    | Type of NONPRIORITY unsecured claim:  |             |
| ☐ Check if this claim is for a community                             | Student loans   |             |
| debt<br>Is the claim subject to offset?                              | Obligations arising out of a separation agreement or divorce that you did not report as priority claims   |             |
| No   | Debts to pension or profit-sharing plans, and other similar debts   |             |
| Yes  | ■ Other. Specify Personal Loan  |             |
| Capital One Bank USA NA  | Last 4 digits of account number   | \$7,523.00  |
| Nonpriority Creditor's Name Attn: Bankruptcy Dept.                   | When was the debt incurred? 05/2008   |             |
| PO Box 30281   | <u></u>   |             |
| Salt Lake City, UT 84130   |   |             |
| Number Street City State Zlp Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply   |             |
| ■ Debtor 1 only  | ☐ Contingent  |             |
| Debtor 2 only  | ☐ Unliquidated  |             |
| Debtor 1 and Debtor 2 only   | ☐ Disputed  |             |
| ☐ At least one of the debtors and another                            | Type of NONPRIORITY unsecured claim:  |             |
| ☐ Check if this claim is for a community                             | ☐ Student loans   |             |
| debt Is the claim subject to offset?                                 | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |             |
| ■ No   | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |             |
| □Yes   | ■ Other. Specify Credit Card Purchases  |             |

Case 17-80785 Doc 1 Filed 04/04/17 Entered 04/04/17 14:34:22 Desc Main Document Page 21 of 48

| Alan R. Ries  | Case number (if know)   |            |
|---|---|------------|
| Capital One Bank USA NA   | Last 4 digits of account number   | \$3,408.00 |
| Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 30281               | When was the debt incurred? 11/2011   |            |
| Number Street City State Zlp Code  Who incurred the debt? Check one.          | As of the date you file, the claim is: Check all that apply   |            |
| Debtor 1 only   | ☐ Contingent  |            |
| Debtor 2 only   | ☐ Unliquidated  |            |
| Debtor 1 and Debtor 2 only  | □ Disputed  |            |
| ☐ At least one of the debtors and another                                     | Type of NONPRIORITY unsecured claim:  |            |
| ☐ Check if this claim is for a community debt                                 | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not                           |            |
| Is the claim subject to offset?   | report as priority claims   |            |
| No  | Debts to pension or profit-sharing plans, and other similar debts   |            |
| Yes   | ■ Other. Specify Credit Card Purchases  |            |
| FNB Omaha   | Last 4 digits of account number   | \$4,427.00 |
| Nonpriority Creditor's Name Attn: Bankruptcy Dept. POB 3412 Omaha. NE 68197   | When was the debt incurred? 01/2016   |            |
| Number Street City State Zlp Code  Who incurred the debt? Check one.          | As of the date you file, the claim is: Check all that apply   |            |
| ■ Debtor 1 only   | ☐ Contingent  |            |
| ☐ Debtor 2 only   | ☐ Unliquidated  |            |
| ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |            |
| ☐ At least one of the debtors and another                                     | Type of NONPRIORITY unsecured claim:  |            |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |
| ■ No  | ☐ Debts to pension or profit-sharing plans, and other similar debts   |            |
| Yes   | ■ Other Specify   |            |
|   |   |            |
| Ford Motor Credit  Nonpriority Creditor's Name                                | Last 4 digits of account number   | Unknown    |
| PO Box 542000<br>Omaha, NE 68154  | When was the debt incurred?   |            |
| Number Street City State Zlp Code Who incurred the debt? Check one.           | As of the date you file, the claim is: Check all that apply   |            |
| Debtor 1 only   | ☐ Contingent  |            |
| ☐ Debtor 2 only   | ☐ Unliquidated  |            |
| ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |            |
| ☐ At least one of the debtors and another                                     | Type of NONPRIORITY unsecured claim:  |            |
| ☐ Check if this claim is for a community                                      | Student loans   |            |
| debt Is the claim subject to offset?  | Obligations arising out of a separation agreement or divorce that you did not report as priority claims                   |            |
| No  | ☐ Debts to pension or profit-sharing plans, and other similar debts   |            |
| ☐ Yes   | ■ Other. Specify Auto Deficiency  |            |

Case 17-80785 Doc 1 Filed 04/04/17 Entered 04/04/17 14:34:22 Desc Main Document Page 22 of 48 Case number (if know)

| 4.8            | Lending Club Corporation                                 | Last 4 digits of account number  | \$1,232.00   |
|----------------|--|--|--|
|                | Nonpriority Creditor's Name                              | When we the debt in some do 40/2044  |  |
|                | 71 Stevenson, Suite 300<br>San Francisco, CA 94105       | When was the debt incurred? 10/2014  |  |
|                | Number Street City State Zlp Code                        | As of the date you file, the claim is: Check all th  | at apply   |
|                | Who incurred the debt? Check one.                        |  |  |
|                | Debtor 1 only  | ☐ Contingent   |  |
|                | Debtor 2 only  | ☐ Unliquidated   |  |
|                | Debtor 1 and Debtor 2 only                               | ☐ Disputed   |  |
|                | ☐ At least one of the debtors and another                | Type of NONPRIORITY unsecured claim:   |  |
|                | ☐ Check if this claim is for a community                 | ☐ Student loans  |  |
|                | debt   | ☐ Obligations arising out of a separation agreeme  | ent or divorce that you did not  |
|                | Is the claim subject to offset?                          | report as priority claims  |  |
|                | ■ No   | Debts to pension or profit-sharing plans, and of   | her similar debts  |
|                | Yes  | Other. Specify Personal Loan   |  |
| 4.9            | Lending Club Corporation                                 | Last 4 digits of account number  | \$5,694.00   |
|                | Nonpriority Creditor's Name                              |  |  |
|                | 71 Stevenson, Suite 300<br>San Francisco, CA 94105       | When was the debt incurred? 01/2016  |  |
|                | Number Street City State ZIp Code                        | As of the date you file, the claim is: Check all th  | at apply   |
|                | Who incurred the debt? Check one.                        | _  |  |
|                | Debtor 1 only  | Contingent   |  |
|                | Debtor 2 only  | ☐ Unliquidated   |  |
|                | ☐ Debtor 1 and Debtor 2 only                             | ☐ Disputed   |  |
|                | At least one of the debtors and another                  | Type of NONPRIORITY unsecured claim:   |  |
|                | ☐ Check if this claim is for a community                 | ☐ Student loans  |  |
|                | debt Is the claim subject to offset?                     | Obligations arising out of a separation agreeme<br>report as priority claims                                     | ent or divorce that you did not  |
|                | ■ No   | Debts to pension or profit-sharing plans, and of   | her similar debts  |
|                | Yes  | Other. Specify Personal Loan   |  |
| 4.1            | Matra Davamadiaa Elmhurat                                |  | <b>\$005.00</b>  |
| 0              | Metro Paramedics - Elmhurst  Nonpriority Creditor's Name | Last 4 digits of account number  | \$995.00   |
|                | PO BOX 1408  | When was the debt incurred? 03/2017  |  |
|                | Elmhurst, IL 60126                                       |  |  |
|                | Number Street City State ZIp Code                        | As of the date you file, the claim is: Check all th  | at apply   |
|                | Who incurred the debt? Check one.                        |  |  |
|                | ■ Debtor 1 only  | ☐ Contingent   |  |
|                | Debtor 2 only  | ☐ Unliquidated   |  |
|                | Debtor 1 and Debtor 2 only                               | ☐ Disputed   |  |
|                | $\square$ At least one of the debtors and another        | Type of NONPRIORITY unsecured claim:   |  |
|                | Check if this claim is for a community                   | ☐ Student loans  |  |
|                | debt Is the claim subject to offset?                     | □ Obligations arising out of a separation agreement report as priority claims                                    | ent or divorce that you did not  |
|                | No   | ☐ Debts to pension or profit-sharing plans, and of   | her similar debts  |
|                | _  |  | arei siriilar debis  |
|                | ☐ Yes  | Other. Specify Medical Debt  |  |
| Part 3         | List Others to Be Notified About a Deb                   | t That You Already Listed  |  |
| is try<br>have | ring to collect from you for a debt you owe to so        | neone else, list the original creditor in Parts 1 or 2, you listed in Parts 1 or 2, list the additional creditor | ted in Parts 1 or 2. For example, if a collection agency<br>then list the collection agency here. Similarly, if you<br>s here. If you do not have additional persons to be |
|                |  | On which entry in Part 1 or Part 2 did you list the original   | creditor?  |
| Equit<br>PO B  | fax<br>ox 740256   | ine 4.1 of (Check one):  | ors with Priority Unsecured Claims   |

Official Form 106 E/F

Page 23 of 48 Case number (if know) Document Debtor 1 Alan R. Ries

| Last 4 digits of account number      | ■ Part 2: Creditors with Nonpriority Unsecured Claims   |
|--------------------------------------|---|
| On which entry in Part 1 or Part 2 d | id you list the original creditor?  |
| Line 4.1 of (Check one):             | ☐ Part 1: Creditors with Priority Unsecured Claims  |
|                                      | ■ Part 2: Creditors with Nonpriority Unsecured Claims   |
| Last 4 digits of account number      |   |
| On which entry in Part 1 or Part 2 d | id you list the original creditor?  |
| Line 4.1 of (Check one):             | ☐ Part 1: Creditors with Priority Unsecured Claims  |
|                                      | ■ Part 2: Creditors with Nonpriority Unsecured Claims   |
| Last 4 digits of account number      |   |
| On which entry in Part 1 or Part 2 d | id you list the original creditor?  |
| Line 4.9 of (Check one):             | ☐ Part 1: Creditors with Priority Unsecured Claims  |
|                                      | ■ Part 2: Creditors with Nonpriority Unsecured Claims   |
| Last 4 digits of account number      |   |
| On which entry in Part 1 or Part 2 d | id you list the original creditor?  |
| Line 4.9 of (Check one):             | ☐ Part 1: Creditors with Priority Unsecured Claims  |
|                                      | ■ Part 2: Creditors with Nonpriority Unsecured Claims   |
|                                      |   |
| Last 4 digits of account number      |   |
|                                      | On which entry in Part 1 or Part 2 d Line 4.1 of (Check one):  Last 4 digits of account number  On which entry in Part 1 or Part 2 d Line 4.1 of (Check one):  Last 4 digits of account number  On which entry in Part 1 or Part 2 d Line 4.9 of (Check one):  Last 4 digits of account number  On which entry in Part 1 or Part 2 d Line 4.9 of (Check one): |

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|                       |     |   |     | ٦  | Total Claim |
|-----------------------|-----|---|-----|----|-------------|
|                       | 6a. | Domestic support obligations  | 6a. | \$ | 0.00        |
| Total                 |     |   |     |    |             |
| claims<br>from Part 1 | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$ | 0.00        |
|                       | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$ | 0.00        |
|                       | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$ | 0.00        |
|                       | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$ | 0.00        |
|                       |     |   |     | 1  | Total Claim |
|                       | 6f. | Student loans   | 6f. | \$ | 0.00        |
| Total claims          |     |   |     |    |             |
| from Part 2           | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00        |
|                       | 6h. | Debts to pension or profit-sharing plans, and other similar debts                                       | 6h. | \$ | 0.00        |
|                       | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$ | 42,973.10   |
|                       | 6j. | Total Nonpriority. Add lines 6f through 6i.   | 6j. | \$ | 42,973.10   |

|   |                         | 12(1)             | 10 1000     |  |
|---|-------------------------|-------------------|-------------|--|
| Fill in this infor                      | mation to identify your | case:             |             |  |
| Debtor 1                                | Alan R. Ries            |                   |             |  |
|   | First Name              | Middle Name       | Last Name   |  |
| Debtor 2                                |                         |                   |             |  |
| (Spouse if, filing)                     | First Name              | Middle Name       | Last Name   |  |
| United States Bankruptcy Court for the: |                         | NORTHERN DISTRICT | OF ILLINOIS |  |
| Case number                             |                         |                   |             |  |
| (if known)                              |                         |                   |             |  |
|   |                         |                   |             |  |

### Official Form 106G

### **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | company wit | h whom you have the o | contract or lease | State what the contract or lease is for |
|-----|-----------|-------------|-----------------------|-------------------|---|
| 2.1 |           |             |                       |                   |   |
|     | Name      |             |                       |                   | _                                       |
|     | Number    | Street      |                       |                   | _                                       |
|     | City      |             | State                 | ZIP Code          |   |
| 2.2 |           |             |                       |                   | _                                       |
|     | Name      |             |                       |                   |   |
|     | Number    | Street      |                       |                   | _                                       |
|     | City      |             | State                 | ZIP Code          |   |
| 2.3 |           |             |                       |                   |   |
|     | Name      |             |                       |                   |   |
|     | Number    | Street      |                       |                   | _                                       |
|     | City      |             | State                 | ZIP Code          | <del>_</del>                            |
| 2.4 |           |             |                       |                   |   |
|     | Name      |             |                       |                   | _                                       |
|     | Number    | Street      |                       |                   |   |
|     | City      |             | State                 | ZIP Code          | _                                       |
| 2.5 |           |             |                       |                   |   |
|     | Name      |             |                       |                   | _                                       |
|     | Number    | Street      |                       |                   | _                                       |
|     | City      |             | State                 | ZIP Code          | <del>_</del>                            |
|     | Oity      |             | Olalo                 |                   |   |

Case 17-80785 Doc 1 Filed 04/04/17 Entered 04/04/17 14:34:22 Desc Main Document Page 25 of 48

|  |  | <u> </u>  | III Paue 25 0   | <u> </u>   |
|--|--|---|---|--|
| Fill in this inf   | ormation to identify your  |   |   |  |
| Debtor 1   | Alan R. Ries   |   |   |  |
|  | First Name   | Middle Name   | Last Name   |  |
| Debtor 2<br>(Spouse if, filing)  | First Name   | Middle Name   | Last Name   |  |
| United States  | Bankruptcy Court for the:  | NORTHERN DISTRICT   | OF ILLINOIS   |  |
|  |  |   |   |  |
| Case number<br>(if known)  |  |   |   | ☐ Check if this is an amended filing   |
| Official E   | orm 106H   |   |   |  |
|  | le H: Your Cod   | ebtors  |   | 12/15  |
| ■ No □ Yes  2. Within Arizona, C ■ No. Go □ Yes. Di  3. In Colum in line 2 a | California, Idaho, Louisiana, to line 3. d your spouse, former spouse, n 1, list all of your codebte | I lived in a community pr<br>Nevada, New Mexico, Pu<br>use, or legal equivalent live<br>ors. Do not include your<br>f that person is a guaran | operty state or territor<br>erto Rico, Texas, Washi<br>with you at the time?<br>spouse as a codebtor<br>tor or cosigner. Make s | y? (Community property states and territories include ington, and Wisconsin.)  if your spouse is filing with you. List the person shows sure you have listed the creditor on Schedule D (Officia |
| out Colur  | nn 2.  | romi 100E/r), or sched  | ule G (Official Form 10   | 6G). Use Schedule D, Schedule E/F, or Schedule G to fi   |
|  | umn 1: Your codebtor<br>e, Number, Street, City, State and Zl  | P Code  |   | Column 2: The creditor to whom you owe the debt Check all schedules that apply:  |
| Nam  Num City  |  | State   | ZIP Code  | ☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐ Schedule G, line  |
|  |  | - <del></del>   | 5545  |  |
| 3.2 Nam  |  |   |   | ☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐ Schedule G, line  |
| Num<br>City  | ber Street   | State   | ZIP Code  |  |

# Case 17-80785 Doc 1 Filed 04/04/17 Entered 04/04/17 14:34:22 Desc Main Document Page 26 of 48

|                   |  |   |   |           |      | _         |               |                         |                                  |          |
|-------------------|--|---|---|-----------|------|-----------|---------------|-------------------------|----------------------------------|----------|
| Fill              | in this information to identify y  | our case:   |   |           |      |           |               |                         |                                  |          |
| Del               | otor 1 Alan R.   | Ries  |   |           | _    |           |               |                         |                                  |          |
|                   | otor 2<br>ouse, if filing)   |   |   |           |      |           |               |                         |                                  |          |
| Uni               | ted States Bankruptcy Court fo   | or the: NORTHERN DISTRI                                 | CT OF ILLINOIS                                    |           |      |           |               |                         |                                  |          |
|                   | se number<br>nown)   |   | _   |           |      |           |               | ed filing<br>ent showin | g postpetition<br>ollowing date: |          |
| 0                 | fficial Form 106l  |   |   |           |      | i         | MM / DD/ Y    | YYYY                    |                                  |          |
| S                 | chedule I: Your I  | ncome   |   |           |      |           |               |                         |                                  | 12/15    |
| spo<br>atta<br>Pa | plying correct information. If use. If you are separated and ch a separate sheet to this for the control of the | your spouse is not filing worm. On the top of any addit | ith you, do not inclu                             | ıde infor | mati | on abou   | ıt your spo   | ouse. If me             | ore space is                     | needed,  |
| 1.                | Fill in your employment<br>information.  |   |   | Debtor 1  |      |           | Debtor 2      | 2 or non-fi             | ling spouse                      |          |
|                   | If you have more than one jo   | b,<br>Employment status                                 | ■ Employed  |           |      |           | ☐ Empl        | oyed                    |                                  |          |
|                   | attach a separate page with information about additional employers.  | Employment status                                       | □ Not employed                                    |           |      |           | ☐ Not e       | employed                |                                  |          |
|                   |  | Occupation  | Sales Service A                                   | dminis    | trat | or        |               |                         |                                  |          |
|                   | Include part-time, seasonal, self-employed work.   | Employer's name   | Auto Truck Gro                                    | up        |      |           |               |                         |                                  |          |
|                   | Occupation may include stude or homemaker, if it applies.  | lent Employer's address                                 | 1420 Brewster (<br>Boulevard<br>Bartlett, IL 6010 |           |      |           |               |                         |                                  |          |
|                   |  | How long employed                                       | there?  |           |      |           | · <u> </u>    |                         |                                  |          |
| Pai               | t 2: Give Details Abou   | Monthly Income  |   |           |      |           |               |                         |                                  |          |
|                   | mate monthly income as of t<br>use unless you are separated.   | he date you file this form. If                          | you have nothing to r                             | eport for | any  | line, wri | te \$0 in the | space. Inc              | clude your noi                   | n-filing |
|                   | u or your non-filing spouse have space, attach a separate she  |   | ombine the informatio                             | n for all | empl | oyers fo  | r that perso  | on on the li            | nes below. If                    | you need |
|                   |  |   |   |           |      | For De    | ebtor 1       |                         | btor 2 or<br>ing spouse          |          |
| 2.                |  | salary, and commissions (but the month)                 |   | 2.        | \$   |           | 6,022.21      | \$                      | N/A                              |          |
| 3.                | Estimate and list monthly of   | overtime pay.   |   | 3.        | +\$  |           | 0.00          | +\$                     | N/A                              |          |
| 4.                | Calculate gross Income. A  | dd line 2 + line 3.                                     |   | 4.        | \$   | 6,0       | 22.21         | \$                      | N/A                              |          |

# Case 17-80785 Doc 1 Filed 04/04/17 Entered 04/04/17 14:34:22 Desc Main Document Page 27 of 48

| Deb | tor 1                       | Alan R. Ries  | -          | Ca   | ase number (if known)       |          |                    |             |          |
|-----|-----------------------------|---|------------|------|-----------------------------|----------|--------------------|-------------|----------|
|     |                             |   |            | i    | For Debtor 1                |          | Debtor<br>filing s | 2 or spouse |          |
|     | Cop                         | by line 4 here  | 4.         | 3    | 6,022.21                    | \$       |                    | N/A         | -        |
| _   | 1.1-4                       |   |            |      |                             |          |                    |             | -        |
| 5.  |                             | all payroll deductions:   | _          |      |                             | •        |                    |             |          |
|     | 5a.                         | Tax, Medicare, and Social Security deductions   | 5a.        |      | 1,550.32                    | \$       |                    | N/A         | _        |
|     | 5b.                         | Mandatory contributions for retirement plans  | 5b.        |      | 0.00                        | \$       |                    | N/A         | _        |
|     | 5c.<br>5d.                  | Voluntary contributions for retirement plans Required repayments of retirement fund loans   | 5c.<br>5d. |      | 0.00                        | \$       |                    | N/A<br>N/A  | _        |
|     | 5u.<br>5e.                  | Insurance   | 5e.        |      |                             | \$—      |                    | N/A<br>N/A  | _        |
|     | 5f.                         | Domestic support obligations  | 5f.        |      | 0.00                        | \$<br>   |                    | N/A<br>N/A  | _        |
|     | 5g.                         | Union dues  | 5g.        |      | 0.00                        | \$       |                    | N/A         | _        |
|     | 5h.                         | Other deductions. Specify: Disability   | 5h.        |      |                             | + \$     |                    | N/A         | _        |
| 6.  |                             | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | _ 6.       | \$   |                             | \$       |                    |             | -        |
|     |                             |   |            | ,    |                             | · —      |                    | N/A         | -        |
| 7.  | Cal                         | culate total monthly take-home pay. Subtract line 6 from line 4.  | 7.         | \$   | 4,295.44                    | \$       |                    | N/A         | _        |
| 8.  | List<br>8a.                 | All other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.                     | 8a.        | . (  | 0.00                        | \$       |                    | N/A         |          |
|     | 8b.                         | Interest and dividends  | 8b.        | . 9  | 0.00                        | \$       |                    | N/A         | _        |
|     | 8c.<br>8d.                  | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  Unemployment compensation   | 8c.<br>8d. |      | 5 <u>0.00</u> 5 <b>0.00</b> | \$<br>\$ |                    | N/A<br>N/A  |          |
|     | 8e.                         | Social Security   | 8e.        | . 9  | 0.00                        | \$       |                    | N/A         | _        |
|     | 8f.<br>8g.                  | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income | 8f.<br>8g. |      | 0.00<br>6 0.00              | \$<br>\$ |                    | N/A<br>N/A  |          |
|     | 8h.                         | Other monthly income. Specify:  | 8h.        | .+ 9 | 0.00                        | + \$     |                    | N/A         | -        |
| 9.  | Add                         | l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.         | \$   | 0.00                        | \$       |                    | N/A         | A        |
| 10  | Cal                         | culate monthly income. Add line 7 + line 9.   | 10.        | \$   | 4,295.44 + \$               |          | N/A                | = \$        | 4,295.44 |
| 10. |                             | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | 10.        | Ψ    | 4,295.44                    |          | IVA                |             | 4,295.44 |
| 11. | Star<br>Incli<br>othe<br>Do | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify:                           | depe       |      | •                           |          | chedule<br>11.     |             | 0.00     |
| 12. |                             | If the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certaillies   |            |      |                             |          | 12.                | \$          | 4,295.44 |
| 13. | Do :                        | you expect an increase or decrease within the year after you file this form No.   | ?          |      |                             |          |                    |             | y income |
|     | _                           | Vac Europeine   |            |      |                             |          |                    |             |          |

# Case 17-80785 Doc 1 Filed 04/04/17 Entered 04/04/17 14:34:22 Desc Main Document Page 28 of 48

| Fill | in this informa                         | tion to identify yo                    | our case:      |  |  | I          |          |                    |   |
|------|---|--|----------------|--|--|------------|----------|--------------------|---|
|      | tor 1                                   | Alan R. Ries                           |                |  |  |            |          | this is:           |   |
|      | otor 2<br>ouse, if filing)              |  |                |  |  |            | A sı     |                    | ving postpetition chapter the following date:         |
| Unit | ed States Bankr                         | uptcy Court for the                    | : NORTH        | IERN DISTRICT OF ILLI                                    | NOIS                                   |            | MM       | / DD / YYYY        |   |
|      | e number<br>nown)                       |  |                |  |  |            |          |                    |   |
|      |   | rm 106J                                |                |  |  |            |          |                    |   |
|      |   | J: Your                                |                |  |  |            |          |                    | 12/1  |
| info | ormation. If m                          |  | eded, atta     | If two married people<br>ch another sheet to thi<br>n.   |  |            |          |                    |   |
| Par  |   | ibe Your House                         | hold           |  |  |            |          |                    |   |
| 1.   | Is this a join  No. Go to               |  |                |  |  |            |          |                    |   |
|      |   |  | in a separ     | ate household?   |  |            |          |                    |   |
|      | □ No<br>□ Ye                            | ~                                      | st file Offici | al Form 106J-2, <i>Expens</i>                            | es for Separate House                  | ehold of D | ebtor 2  | 2.                 |   |
| 2.   | Do you have                             | e dependents?                          | □ No           |  |  |            |          |                    |   |
|      | Do not list Do<br>Debtor 2.             | ebtor 1 and                            | Yes.           | Fill out this information for each dependent             | Dependent's relat<br>Debtor 1 or Debto |            |          | Dependent's<br>age | Does dependent live with you?                         |
|      | Do not state dependents                 |  |                |  | Daughter                               |            |          | 2                  | □ No<br>■ Yes   |
|      |   |  |                |  | Son                                    |            |          | 6                  | □ No<br>■ Yes<br>□ No                                 |
|      |   |  |                |  | Girlfriend                             |            |          | 30                 | ■ Yes   |
| 3.   |   | enses include<br>f people other t      | hon            | No   |  |            |          |                    | ☐ Yes   |
|      | • | d your depende                         |                | Yes  |  |            |          |                    |   |
| exp  | imate your ex                           |  | our bankrı     | uptcy filing date unless                                 |  |            |          |                    | apter 13 case to report<br>f the form and fill in the |
| Inc  | lude expense                            | n assistance an                        |                | government assistance<br>luded it on <i>Schedule I</i> : |  |            |          | Your expe          | enses   |
| (01  | nciai Form 10                           | 01.)                                   |                |  |  |            |          | Tour Oxp           |   |
| 4.   |   | or home owners<br>and any rent for the |                | ses for your residence<br>r lot.                         | Include first mortgage                 | e<br>4.    | \$_      |                    | 758.60  |
|      | If not includ                           | led in line 4:                         |                |  |  |            |          |                    |   |
|      | 4a. Real e                              | estate taxes                           |                |  |  | 4a.        | \$_      |                    | 0.00  |
|      | •                                       | rty, homeowner's                       |                |  |  | 4b.        |          |                    | 0.00  |
|      |   |  | •              | ipkeep expenses  |  | 4c.        |          |                    | 50.00   |
| 5.   |   | owner's associat                       |                | dominium dues<br>o <b>ur residence.</b> such as h        | nome equity loans                      | 4d.<br>5.  | \$<br>\$ |                    | 0.00  |

# Case 17-80785 Doc 1 Filed 04/04/17 Entered 04/04/17 14:34:22 Desc Main Document Page 29 of 48

| Debtor        | 1 Alan R. Ries  | Case num            | ber (if known)   |                           |
|---------------|---|---------------------|------------------|---------------------------|
| S. Ut         | tilities:   |                     |                  |                           |
| 6a            |   | 6a.                 | \$               | 160.00                    |
| 6b            | , · · · · · · · · · · · · · · · · · · ·   | 6b.                 |                  | 70.00                     |
| 6c            |   | 6c.                 | · -              | 326.00                    |
| 6d            |   | 6d.                 | · <u> </u>       |                           |
|               |   |                     | *                | 0.00                      |
|               | ood and housekeeping supplies   | 7.                  | · -              | 900.00                    |
| _             | hildcare and children's education costs   | 8.                  | \$               | 350.00                    |
|               | lothing, laundry, and dry cleaning  | 9.                  | \$               | 200.00                    |
| ). <b>P</b> e | ersonal care products and services  | 10.                 | \$               | 75.00                     |
| . Ме          | edical and dental expenses  | 11.                 | \$               | 75.00                     |
|               | ransportation. Include gas, maintenance, bus or train fare.   | 12.                 | \$               | 250.00                    |
|               | o not include car payments.   |                     | ·                |                           |
|               | ntertainment, clubs, recreation, newspapers, magazines, and books   | 13.                 | · <u> </u>       | 50.00                     |
|               | haritable contributions and religious donations   | 14.                 | \$               | 0.00                      |
|               | surance.  |                     |                  |                           |
|               | o not include insurance deducted from your pay or included in lines 4 or 20.  |                     | •                | _                         |
|               | 5a. Life insurance  | 15a.                | ·                | 0.00                      |
|               | 5b. Health insurance  | 15b.                | \$               | 0.00                      |
| 15            | 5c. Vehicle insurance   | 15c.                | \$               | 80.00                     |
| 15            | 5d. Other insurance. Specify:   | 15d.                | \$               | 0.00                      |
|               | axes. Do not include taxes deducted from your pay or included in lines 4 or   | 20.                 |                  |                           |
|               | pecify:   | 16.                 | \$               | 0.00                      |
|               | stallment or lease payments:  |                     | _                |                           |
|               | 7a. Car payments for Vehicle 1  | 17a.                | \$               | 764.00                    |
| 17            | 7b. Car payments for Vehicle 2  | 17b.                | \$               | 0.00                      |
| 17            | 7c. Other. Specify:   | 17c.                | \$               | 0.00                      |
| 17            | 7d. Other. Specify:   | 17d.                | \$               | 0.00                      |
|               | our payments of alimony, maintenance, and support that you did not r  |                     | Ф.               | 0.00                      |
|               | educted from your pay on line 5, Schedule I, Your Income (Official For  | m <b>106I).</b> 18. | · -              |                           |
|               | ther payments you make to support others who do not live with you.  |                     | \$               | 0.00                      |
|               | pecify:   | 19.                 |                  |                           |
| ). Ot         | ther real property expenses not included in lines 4 or 5 of this form or  |                     |                  |                           |
| 20            | Da. Mortgages on other property   | 20a.                | \$               | 0.00                      |
| 20            | 0b. Real estate taxes   | 20b.                | \$               | 0.00                      |
| 20            | Oc. Property, homeowner's, or renter's insurance  | 20c.                | \$               | 0.00                      |
| 20            | Od. Maintenance, repair, and upkeep expenses  | 20d.                | \$               | 0.00                      |
|               | De. Homeowner's association or condominium dues   | 20e.                | \$               | 0.00                      |
|               | ther: Specify: Birthdays/Holidays/Haircuts  | 21.                 | ·                | 100.00                    |
|               | <del></del>   |                     | - Ψ              | 100.00                    |
|               | alculate your monthly expenses  |                     |                  |                           |
|               | 2a. Add lines 4 through 21.   |                     | \$               | 4,208.60                  |
| 22            | 2b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form  | 106J-2              | \$               |                           |
| 22            | 2c. Add line 22a and 22b. The result is your monthly expenses.  |                     | \$               | 4,208.60                  |
| . Ca          | alculate your monthly net income.   |                     |                  |                           |
|               | Ba. Copy line 12 (your combined monthly income) from Schedule I.  | 23a.                | \$               | 4,295.44                  |
|               | Bb. Copy your monthly expenses from line 22c above.   | 23b.                | · —              |                           |
| 23            | b. Copy your monthly expenses northline 220 above.  | ∠30.                | -φ               | 4,208.60                  |
| 23            | 3c. Subtract your monthly expenses from your monthly income.  |                     |                  |                           |
| _0            | The result is your <i>monthly net income</i> .  | 23c.                | \$               | 86.84                     |
|               | , ,   |                     |                  |                           |
|               | o you expect an increase or decrease in your expenses within the year<br>or example, do you expect to finish paying for your car loan within the year or do you e |                     |                  | ase or decrease because ( |
|               | odification to the terms of your mortgage?  | Apool your mongage  | payment to incle | ase of decrease because ( |
|               | No.   |                     |                  |                           |
|               |   |                     |                  |                           |
|               | Yes. Explain here:  |                     |                  |                           |

# Case 17-80785 Doc 1 Filed 04/04/17 Entered 04/04/17 14:34:22 Desc Main Document Page 30 of 48

| Fill in this inform             | mation to identify your                                       | case:                    |                         |                            |  |
|---------------------------------|---|--------------------------|-------------------------|----------------------------|--|
| Debtor 1                        | Alan R. Ries  |                          |                         |                            |  |
|                                 | First Name  | Middle Name              | Last Name               |                            |  |
| Debtor 2<br>(Spouse if, filing) | First Name  | Middle Name              | Last Name               |                            |  |
| United States Ba                | nkruptcy Court for the:                                       | NORTHERN DISTRICT        | OF ILLINOIS             |                            |  |
| Case number _<br>(if known)     |   |                          |                         |                            | ☐ Check if this is an amended filing   |
| Official Forn                   | n 106Dec  |                          |                         |                            |  |
| Declarat                        | ion About a   | an Individual            | <b>Debtor's S</b>       | Schedules                  | 12/15  |
| years, or both. 1               | or property by fraud i<br>8 U.S.C. §§ 152, 1341, 1<br>n Below |                          | ruptcy case can resu    | ult in fines up to \$250,0 | 00, or imprisonment for up to 20   |
| Did you pa                      | y or agree to pay some  | eone who is NOT an attor | ney to help you fill ou | ut bankruptcy forms?       |  |
| ■ No                            |   |                          |                         |                            |  |
| ☐ Yes. N                        | Name of person  |                          |                         |                            | nkruptcy Petition Preparer's Notice,<br>n, and Signature (Official Form 119) |
|                                 | Ity of perjury, I declare<br>e true and correct.              | that I have read the sum | mary and schedules      | filed with this declarati  | on and   |
| X /s/ Alai                      | n R. Ries   |                          | X                       |                            |  |
| Alan R                          |   |                          | Signature               | e of Debtor 2              |  |

Date \_\_\_\_\_

Date **April 4, 2017** 

# Case 17-80785 Doc 1 Filed 04/04/17 Entered 04/04/17 14:34:22 Desc Main Document Page 31 of 48

| Fill i         | n this inform              | nation to identify you                       | r case:  |   |   |                                     |   |
|----------------|----------------------------|--|--|---|---|-------------------------------------|---|
| Debt           | tor 1                      | Alan R. Ries                                 |  |   |   |                                     |   |
| Daha           | 0                          | First Name                                   | Middle Name  | Last Name   |   |                                     |   |
| Debt<br>(Spou  | or 2<br>se if, filing)     | First Name                                   | Middle Name  | Last Name   |   |                                     |   |
| Unite          | ed States Bar              | nkruptcy Court for the:                      | NORTHERN DISTRIC   | T OF ILLINOIS                                     |   |                                     |   |
|                |                            | , ,  |  |   |   |                                     |   |
| (if kno        | e number<br>wn)            |  |  |   |   | _                                   | heck if this is an mended filing                      |
| Sta            |                            | of Financial                                 | Affairs for Indiv  |   |   |                                     | 4/10  |
| infori<br>numb | mation. If moder (if known | ore space is needed,<br>n). Answer every que | ble. If two married peop<br>attach a separate sheet<br>stion.<br>rital Status and Where          | to this form. On the to                           | oth are equally resp<br>p of any additional p | onsible for sup<br>pages, write you | plying correct<br>ir name and case                    |
| 1. \           | What is your               | current marital statu                        | is?  |   |   |                                     |   |
| I              | ☐ Married                  |  |  |   |   |                                     |   |
|                | Not mar                    | ried   |  |   |   |                                     |   |
| 2. I           | During the la              | ast 3 years, have you                        | lived anywhere other th  | an where you live now'                            | ?   |                                     |   |
|                | □ No                       |  |  |   |   |                                     |   |
| i              |                            | t all of the places you I                    | ived in the last 3 years. Do   | o not include where you                           | live now.                                     |                                     |   |
|                | Debtor 1 Pri               | or Address:                                  | Dates Debto  | r 1 Debtor 2 P                                    | Prior Address:                                |                                     | Dates Debtor 2  |
|                | Debtor 1111                | or Address.                                  | lived there  |   |   |                                     | lived there   |
|                | 2017 North<br>Wheaton, I   | n Main Street, Apt.<br>IL 60187              | 303B From-To:<br>- 8/2016  | ☐ Same as   | Debtor 1                                      |                                     | ☐ Same as Debtor 1<br>From-To:                        |
|                | ■ No ■ Yes. Ma             | es include Arizona, Ca                       | ver live with a spouse or<br>lifornia, Idaho, Louisiana,<br>nedule H: Your Codebtors<br>r Income | Nevada, New Mexico, P                             |   |                                     |   |
| I              | Fill in the tota           | I amount of income yo                        | nployment or from opera<br>u received from all jobs ar<br>have income that you rec               | nd all businesses, includi                        | ing part-time activities                      | S.                                  | ndar years?   |
| ı              | □ No                       |  |  |   |   |                                     |   |
| - 1            | Yes. Fill                  | in the details.                              |  |   |   |                                     |   |
|                |                            |  | Debtor 1   |   | Debtor 2                                      |                                     |   |
|                |                            |  | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions<br>exclusions) | Sources of Check all the                      |                                     | Gross income<br>(before deductions<br>and exclusions) |
|                |                            | of current year until<br>d for bankruptcy:   | ■ Wages, commissions bonuses, tips   | \$16,67   | 76.87   | commissions,<br>ps                  |   |
|                |                            |  | ☐ Operating a business   |   | ☐ Operatir                                    | ng a business                       |   |

Page 32 of 48 Case number (if known) Document Debtor 1 Alan R. Ries

|    |   |  |  | Debtor 1   |   |   | Debtor 2   |  |   |
|----|---|--|--|--|---|---|--|--|---|
|    |   |  |  | Sources of income<br>Check all that apply.   | (befo   | ss income<br>ore deductions and<br>usions)  | Sources of inco  |  | Gross income<br>(before deductions<br>and exclusions) |
|    | r last caler<br>inuary 1 to               | dar year:<br>December                        | 31, 2016 )   | ■ Wages, commissions bonuses, tips   | S,  | \$70,802.80   | ☐ Wages, commonutes with the wages was a common wages. | nissions,  |   |
|    |   |  |  | ☐ Operating a business   | 3   |   | ☐ Operating a b  | ousiness   |   |
|    |   | dar year be<br>December                      |  | ■ Wages, commissions bonuses, tips   | S,  | \$64,645.95   | ☐ Wages, commonutes bonuses, tips  | nissions,  |   |
|    |   |  |  | ☐ Operating a business   | S   |   | ☐ Operating a b  | ousiness   |   |
| 5. | Include in and other winnings.  List each | come regard<br>public bene<br>If you are fil | dless of wheth<br>fit payments;<br>ing a joint cas<br>the gross inco   | e during this year or the<br>ner that income is taxable.<br>pensions; rental income; i<br>he and you have income the<br>name from each source sep                  | Examples interest; div  | of other income are a idends; money collectived together, list it of  | alimony; child suppo<br>cted from lawsuits; r<br>only once under De  | oyalties; ar<br>btor 1.  |   |
|    |   |  |  |  |   |   |  |  |   |
|    |   |  |  | Debtor 1   | 0   | ! <b>f</b>  | Debtor 2   |  | O i   |
|    |   |  |  | Sources of income<br>Describe below.   | each<br>(befo   | ss income from n source ore deductions and usions)  | Sources of inco<br>Describe below.   | me   | Gross income<br>(before deductions<br>and exclusions) |
| 6. | □ No.                                     | During the No. Yes                           | ebtor 1 nor E<br>primarily for a<br>90 days befor<br>Go to line 7<br>List below e<br>paid that cr<br>not include<br>to adjustmen<br>or Debtor 2 of<br>90 days befor<br>Go to line 7<br>List below e<br>include pay | each creditor to whom you editor. Do not include pays payments to an attorney for ton 4/01/19 and every 3 year both have primarily course you filed for bankruptcy | ensumer de<br>ehold purpo<br>y, did you p<br>u paid a tota<br>ments for d<br>for this bank<br>years after t<br>ensumer de<br>y, did you p | ebts. Consumer debi<br>ose."  ay any creditor a tota  I of \$6,425* or more omestic support obligation cruptcy case. hat for cases filed on  ebts.  I of \$600 or more an | al of \$6,425* or mor<br>in one or more paying<br>gations, such as chi<br>or after the date of<br>al of \$600 or more?                           | e? ments and to lid support a adjustment of the control of the con | the total amount you and alimony. Also, do t.         |
|    | Creditor                                  | s Name an                                    | d Address  | Dates of pay   | ment  | Total amount paid   | Amount you still owe   | Was this   | payment for   |
|    | PO Box                                    | in Financi<br>1010<br>ille, IN 477           |  | 2/2017 - 4/2   | 2017  | \$2,292.00  | \$33,325.00  |  |   |

Page 33 of 48
Case number (if known) Document Debtor 1 Alan R. Ries

|     | Creditor's Name and Address  | Dates of payment      | Total amount paid   | Amount you still owe | Was this pa  | ayment for                     |  |  |  |  |  |
|-----|--|-----------------------|---------------------|----------------------|--|--------------------------------|--|--|--|--|--|
|     | Borrowers First Inc<br>1114 Lost Creek BV 220<br>Austin, TX 78746  | 1/2017 - 2/2017       | \$995.92            | \$11,514.10          | ☐ Mortgage ☐ Car ☐ Credit Co ■ Loan Re ☐ Suppliers ☐ Other | ard<br>payment<br>s or vendors |  |  |  |  |  |
|     | Capital One Bank USA NA<br>Attn: Bankruptcy Dept.<br>PO Box 30281<br>Salt Lake City, UT 84130  | 1/2017 - 2/2017       | \$644.00            | \$10,931.00          | ☐ Mortgage ☐ Car ☐ Credit Ca ☐ Loan Re ☐ Suppliers ☐ Other | ard<br>payment<br>s or vendors |  |  |  |  |  |
| 7.  | Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. |                       |                     |                      |  |                                |  |  |  |  |  |
|     | Yes. List all payments to an insider.  |                       |                     |                      |  |                                |  |  |  |  |  |
|     | Insider's Name and Address   | Dates of payment      | Total amount paid   | Amount you still owe | Reason for   | this payment                   |  |  |  |  |  |
| 8.  | Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cos  No Yes. List all payments to an insider  |                       | ments or transfer a | ny property on ad    | ccount of a d  | ebt that benefited an          |  |  |  |  |  |
|     | Insider's Name and Address   | Dates of payment      | Total amount paid   | Amount you still owe | Reason for<br>Include cred                                 | this payment<br>litor's name   |  |  |  |  |  |
| Par | t 4: Identify Legal Actions, Repossession  | ns, and Foreclosures  |                     |                      |  |                                |  |  |  |  |  |
| 9.  | Within 1 year before you filed for bankrupt List all such matters, including personal injury modifications, and contract disputes.  No Yes. Fill in the details.   |                       |                     |                      |  |                                |  |  |  |  |  |
|     | Case title Case number   | Nature of the case    | Court or agency     |                      | Status of th   | ne case                        |  |  |  |  |  |
| 10. | Within 1 year before you filed for bankrupt Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.  |                       | erty repossessed, f | oreclosed, garnis    | hed, attache   | d, seized, or levied?          |  |  |  |  |  |
|     | Creditor Name and Address  | Describe the Property |                     | Date                 |  | Value of the                   |  |  |  |  |  |
|     |  |                       |                     |                      |  | property                       |  |  |  |  |  |
|     |  | Explain what happened | ı                   |                      |  |                                |  |  |  |  |  |

Case 17-80785 Doc 1 Filed 04/04/17 Entered 04/04/17 14:34:22 Desc Main Document Page 34 of 48 Case number (if known)

| 11. | Within 90 days before you filed for banks accounts or refuse to make a payment b  No Yes. Fill in the details.  |          | did any creditor, including a bank or financial in<br>you owed a debt?   | stitution, set off any a                            | amounts from your         |
|-----|---|----------|--|---|---------------------------|
|     | Creditor Name and Address   | Des      | scribe the action the creditor took  | Date action was taken                               | Amount                    |
| 12. | Within 1 year before you filed for bankru court-appointed receiver, a custodian, or □ No □ Yes  |          | as any of your property in the possession of an appropriate of the possession of the possession of a possession of the p | assignee for the bene                               | efit of creditors, a      |
| Par | t 5: List Certain Gifts and Contribution  | s        |  |   |                           |
| 13. | Within 2 years before you filed for bankr  No  Yes. Fill in the details for each gift.  Gifts with a total value of more than \$60 per person  Person to Whom You Gave the Gift and |          | lid you give any gifts with a total value of more t  Describe the gifts  | han \$600 per person<br>Dates you gave<br>the gifts | ?<br>Value                |
| 14. | Address:  Within 2 years before you filed for bankr  No  Yes. Fill in the details for each gift or c  |          | lid you give any gifts or contributions with a tota  | al value of more than                               | \$600 to any charity?     |
|     | Gifts or contributions to charities that t<br>more than \$600<br>Charity's Name<br>Address (Number, Street, City, State and ZIP Code  | otal     | Describe what you contributed  | Dates you contributed                               | Value                     |
| Par | t 6: List Certain Losses  |          |  |   |                           |
| 15. | Within 1 year before you filed for bankru or gambling?  | ptcy or  | since you filed for bankruptcy, did you lose any   | thing because of thef                               | it, fire, other disaster  |
|     | ■ No □ Yes. Fill in the details.  |          |  |   |                           |
|     | Describe the property you lost and how the loss occurred  | Include  | be any insurance coverage for the loss the amount that insurance has paid. List pending ace claims on line 33 of Schedule A/B: Property.   | Date of your loss                                   | Value of property<br>lost |
| Par | t 7: List Certain Payments or Transfers   | <b>s</b> |  |   |                           |
| 16. | consulted about seeking bankruptcy or p   | oreparir | d you or anyone else acting on your behalf pay on ga bankruptcy petition? s, or credit counseling agencies for services require  |   | rty to anyone you         |
|     | □ No ■ Yes. Fill in the details.  |          |  |   |                           |
|     | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Y  | ou ou    | Description and value of any property transferred  | Date payment or transfer was made                   | Amount of payment         |
|     | 001DebtorCC<br>378 Summit Ave.<br>Jersey City, NJ 07306<br>www.debtorcc.org   |          | \$14.95  | 3/28/2017   | \$14.95                   |

Case 17-80785 Doc 1 Filed 04/04/17 Entered 04/04/17 14:34:22 Desc Main Page 35 of 48
Case number (if known) Document

Debtor 1 Alan R. Ries

|     | Person Who Was Paid<br>Address<br>Email or website address<br>Person Who Made the Payment, if Not You  | Description and transferred       | value of any prop                                      | erty   | Date payment or transfer was made                       | Amount of payment                             |  |  |  |
|-----|--|-----------------------------------|--|--|---|---|--|--|--|
|     | Springer Law Firm<br>2222 E State St, Suite 107<br>Rockford, IL 61104  | \$500.00                          |  |  | 3/2017  | \$500.00                                      |  |  |  |
| 17. | Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?  Do not include any payment or transfer that you listed on line 16.  |                                   |  |  |   |   |  |  |  |
|     | ■ No   |                                   |  |  |   |   |  |  |  |
|     | Yes. Fill in the details.  Person Who Was Paid  Address  | Description and transferred       | Description and value of any property transferred      |  | Date payment or transfer was made                       | Amount of payment                             |  |  |  |
| 18. |  |                                   |  |  |   |   |  |  |  |
|     | Person Who Received Transfer<br>Address<br>Person's relationship to you  | Description and property transfer |  | Describe any property or<br>payments received or debts<br>paid in exchange |   | Date transfer was made                        |  |  |  |
|     | Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  No  Yes. Fill in the details.   |                                   |  |  |   |   |  |  |  |
|     | Name of trust  | Description and                   | Description and value of the property transfe          |  |   | Date Transfer was made                        |  |  |  |
| Par | t 8: List of Certain Financial Accounts, Ins   | struments, Safe Deposi            | it Boxes, and Sto                                      | age Units  |   |   |  |  |  |
|     | Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. |                                   |  |  |   |   |  |  |  |
|     | Yes. Fill in the details.  |                                   |  |  |   |   |  |  |  |
|     | Name of Financial Institution and<br>Address (Number, Street, City, State and ZIP<br>Code)   | Last 4 digits of account number   | instrument   |  | ate account was<br>osed, sold,<br>oved, or<br>ansferred | Last balance<br>before closing or<br>transfer |  |  |  |
|     | TCF National Bank<br>Attn: Bankruptcy Dept.<br>801 Marquette Avenue<br>Minneapolis, MN 55402   | XXXX-9521                         | ■ Checking □ Savings □ Money Marke □ Brokerage □ Other | _  | <b>2017</b>   | \$1,000.00                                    |  |  |  |

Case 17-80785 Doc 1 Filed 04/04/17 Entered 04/04/17 14:34:22 Desc Main Page 36 of 48 Case number (if known) Document

Debtor 1 Alan R. Ries

| 21. | Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?  |   |                                   |                       |  |  |  |  |  |
|-----|---|---|-----------------------------------|-----------------------|--|--|--|--|--|
|     | ■ No  |   |                                   |                       |  |  |  |  |  |
|     | Yes. Fill in the details.   |   |                                   |                       |  |  |  |  |  |
|     | Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  | Who else had access to it? Address (Number, Street, City, State and ZIP Code)                 | Describe the contents             | Do you still have it? |  |  |  |  |  |
| 22. | Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?   |   |                                   |                       |  |  |  |  |  |
|     | No  |   |                                   |                       |  |  |  |  |  |
|     | Yes. Fill in the details.   |   |                                   |                       |  |  |  |  |  |
|     | Name of Storage Facility Address (Number, Street, City, State and ZIP Code)   | Who else has or had access<br>to it?<br>Address (Number, Street, City,<br>State and ZIP Code) | Describe the contents             | Do you still have it? |  |  |  |  |  |
| Par | 9: Identify Property You Hold or Control for S  | Someone Else  |                                   |                       |  |  |  |  |  |
| 23. | Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.  |   |                                   |                       |  |  |  |  |  |
|     | ■ No  |   |                                   |                       |  |  |  |  |  |
|     | Yes. Fill in the details.   |   |                                   |                       |  |  |  |  |  |
|     | Owner's Name<br>Address (Number, Street, City, State and ZIP Code)  | Where is the property?<br>(Number, Street, City, State and ZIP<br>Code)                       | Describe the property             | Value                 |  |  |  |  |  |
| Par | Give Details About Environmental Informa  | tion  |                                   |                       |  |  |  |  |  |
| For | he purpose of Part 10, the following definitions a  | apply:  |                                   |                       |  |  |  |  |  |
|     | Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. |   |                                   |                       |  |  |  |  |  |
|     | Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.  |   |                                   |                       |  |  |  |  |  |
|     | Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.   |   |                                   |                       |  |  |  |  |  |
| Rep | ort all notices, releases, and proceedings that yo  | u know about, regardless of when  | they occurred.                    |                       |  |  |  |  |  |
| 24. | Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?  |   |                                   |                       |  |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.  |   |                                   |                       |  |  |  |  |  |
|     | Name of site<br>Address (Number, Street, City, State and ZIP Code)  | Governmental unit<br>Address (Number, Street, City, State and<br>ZIP Code)                    | Environmental law, if you know it | Date of notice        |  |  |  |  |  |
| 25. | Have you notified any governmental unit of any release of hazardous material?   |   |                                   |                       |  |  |  |  |  |
|     | ■ No □ Yes. Fill in the details.  |   |                                   |                       |  |  |  |  |  |
|     | Name of site Address (Number, Street, City, State and ZIP Code)   | Governmental unit<br>Address (Number, Street, City, State and                                 | Environmental law, if you know it | Date of notice        |  |  |  |  |  |
|     |   | ZIP Code)   |                                   |                       |  |  |  |  |  |

Page 37 of 48 Case number (if known) Document Debtor 1 Alan R. Ries 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Alan R. Ries Alan R. Ries Signature of Debtor 2 Signature of Debtor 1 Date April 4, 2017 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 17-80785

Doc 1

Filed 04/04/17

Entered 04/04/17 14:34:22

# Case 17-80785 Doc 1 Filed 04/04/17 Entered 04/04/17 14:34:22 Desc Main Document Page 38 of 48

| Fill in this inform                  | nation to identify your                        | case:                 |  |  |
|--------------------------------------|--|-----------------------|--|--|
| Debtor 1                             | Alan R. Ries                                   |                       |  |  |
| Dobtor 2                             | First Name                                     | Middle Name           | Last Name  | -  |
| Debtor 2<br>(Spouse if, filing)      | First Name                                     | Middle Name           | Last Name  | -  |
| United States Bar                    | nkruptcy Court for the:                        | NORTHERN DIST         | RICT OF ILLINOIS   | _  |
| Case number                          |  |                       |  |  |
| (if known)                           |  |                       |  | ☐ Check if this is an amended filing                     |
| o# =                                 |  |                       |  |  |
| Official For                         |  | n for Indiv           | iduala Eilina Undar Cha  | ntor 7   |
| Statemen                             | it of intentio                                 | n for indiv           | iduals Filing Under Cha  | <b>pter 7</b> 12/15                                      |
| If you are an indiv                  | vidual filing under cha                        | oter 7, you must fill | out this form if:  |  |
| creditors have                       | claims secured by yo                           | ur property, or       |  |  |
|                                      | ed personal property a                         |                       | ot expired.<br>you file your bankruptcy petition or by the da  | te set for the meeting of creditors                      |
|                                      | ver is earlier, unless th                      |                       | time for cause. You must also send copies  |  |
|                                      | ople are filing together<br>d date the form.   | in a joint case, bot  | h are equally responsible for supplying corre  | ect information. Both debtors must                       |
|                                      | nd accurate as possib<br>our name and case nur |                       | needed, attach a separate sheet to this form   | . On the top of any additional pages,                    |
| Part 1: List Yo                      | our Creditors Who Have                         | e Secured Claims      |  |  |
|                                      |  |                       | Creditors Who Have Claims Secured by Pro   | norty (Official Form 106D) fill in the                   |
| information be                       | low.   |                       | · ·  |  |
| Identify the cre                     | ditor and the property the                     | nat is collateral     | What do you intend to do with the property secures a debt?   | that Did you claim the property as exempt on Schedule C? |
| Creditor's <b>O</b> ı                | neMain Financial                               |                       | ☐ Surrender the property.  | □ No   |
| name:                                |  |                       | ☐ Retain the property and redeem it.   | <u>_</u>   |
| Description of                       | 2013 Jeep Wrangle                              | er Sahara             | Retain the property and enter into a   | ■ Yes  |
| property                             | 50,000 miles                                   |                       | Reaffirmation Agreement.  Retain the property and [explain]:   |  |
| securing debt:                       |  |                       |  |  |
| Part 2: List Yo                      | ur Unexpired Persona                           | Property Leases       |  |  |
| in the information                   | n below. Do not list rea                       | l estate leases. Une  | n Schedule G: Executory Contracts and Une<br>expired leases are leases that are still in effect<br>the trustee does not assume it. 11 U.S.C. § 36. | ct; the lease period has not yet ended.                  |
|                                      |  |                       | <u> </u>   |  |
| Describe your un                     | nexpired personal prop                         | erty leases           |  | Will the lease be assumed?                               |
| Lessor's name:                       | and  |                       |  | □ No   |
| Description of lea<br>Property:      | ocu  |                       |  | ☐ Yes  |
| Loccor's name:                       |  |                       |  | П.,,   |
| Lessor's name:<br>Description of lea | sed  |                       |  | □ No   |
| Property:                            |  |                       |  | ☐ Yes  |
| Lessor's name:                       |  |                       |  | □ No   |

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

# Case 17-80785 Doc 1 Filed 04/04/17 Entered 04/04/17 14:34:22 Desc Main Document Page 39 of 48

| Deb        | otor 1 _                            | Alan R. Ries                            | Case number (if known)  |                             |
|------------|-------------------------------------|---|-------------------------|-----------------------------|
|            | scription of perty:                 | of leased                               |                         | ] Yes                       |
| Des        | sor's nar<br>scription operty:      | ne:<br>of leased                        |                         | ] No                        |
| Des        | sor's nar<br>scription of<br>perty: | ne:<br>of leased                        |                         | ] No                        |
| Des        | sor's nar<br>scription operty:      | ne:<br>of leased                        |                         | ] No<br>] Yes               |
| Des<br>Pro | perty:                              | of leased                               |                         | ] No                        |
| prop       | er penal<br>perty tha               | t is subject to an unexpired lease      |                         | res a debt and any personal |
| X          | Alan F                              | n R. Ries<br>R. Ries<br>ure of Debtor 1 | X Signature of Debtor 2 |                             |
|            | Date                                | April 4, 2017                           | Date                    |                             |

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html</a>#procedure.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-80785 Doc 1 Filed 04/04/17 Entered 04/04/17 14:34:22 Desc Main Document Page 44 of 48

B2030 (Form 2030) (12/15)

## **United States Bankruptcy Court Northern District of Illinois**

| In re | e Alan R. Ries  |   | Case No.   |                                 |       |
|-------|---|---|--|---------------------------------|-------|
|       |   | Debtor(s)   | Chapter  | 7                               |       |
|       | DISCLOSURE OF COMPE   | ENSATION OF ATTO  | RNEY FOR D   | EBTOR(S)                        |       |
|       | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the fil be rendered on behalf of the debtor(s) in contemplation  | ing of the petition in bankruptcy   | , or agreed to be paid   | to me, for services rendered of | or to |
|       | For legal services, I have agreed to accept   |   | \$   | 500.00                          |       |
|       | Prior to the filing of this statement I have received   | l   | \$   | 500.00                          |       |
|       | Balance Due   |   |  | 0.00                            |       |
| 2.    | The source of the compensation paid to me was:  |   |  |                                 |       |
|       | ■ Debtor □ Other (specify):   |   |  |                                 |       |
| 3.    | The source of compensation to be paid to me is:   |   |  |                                 |       |
|       | ■ Debtor □ Other (specify):   |   |  |                                 |       |
| 4.    | ■ I have not agreed to share the above-disclosed com  | pensation with any other person   | unless they are mem  | bers and associates of my law   | firm. |
|       | ☐ I have agreed to share the above-disclosed compen copy of the agreement, together with a list of the name of th |   |  |                                 | A     |
| 5.    | In return for the above-disclosed fee, I have agreed to   | render legal service for all aspec  | ts of the bankruptcy   | case, including:                |       |
|       | <ul> <li>a. Analysis of the debtor's financial situation, and render</li> <li>b. Preparation and filing of any petition, schedules, state.</li> <li>c. Representation of the debtor at the meeting of credit</li> <li>d. [Other provisions as needed]</li> <li>Negotiations with secured creditors to reaffirmation agreements and applications of the secured creditors of the secured creditors of the secured creditors.</li> </ul>  | atement of affairs and plan which<br>tors and confirmation hearing, a<br>reduce to market value; ex<br>tions as needed; preparation | h may be required;<br>nd any adjourned hea<br>emption planning | rings thereof;                  | :     |
| 6.    | By agreement with the debtor(s), the above-disclosed f<br>Representation of the debtors in any d<br>any other adversary proceeding.   |   |  | es, relief from stay action     | ıs or |
|       |   | CERTIFICATION   |  |                                 |       |
|       | I certify that the foregoing is a complete statement of a pankruptcy proceeding.  | ny agreement or arrangement fo  | r payment to me for i  | epresentation of the debtor(s)  | in    |
| A     | April 4, 2017   | /s/ Daniel A. Spri  | nger   |                                 |       |
| Ī     | Date  | Daniel A. Spring  |  |                                 |       |
|       |   | Signature of Attorn Springer Law Fir  |  |                                 |       |
|       |   | 2222 E State St   |  |                                 |       |
|       |   | Suite 107<br>Rockford, IL 611   | 04   |                                 |       |
|       |   | 815.312.4725  | U <del>4</del>   |                                 |       |
|       |   | _dspringerlaw@g   | mail.com   |                                 |       |
|       |   | Name of law firm  |  |                                 |       |

Springer Law Firm

2222 East State St. # 107, Rockford, IL

815.312.4725

### CHAPTER 7 RETAINER AGREEMENT

The undersigned agrees to hire Springer Law Firm to represent the undersigned in a Chapter 7 bankruptcy and agrees to the following terms and conditions:

- 1. The attorney fees for the Chapter 7 bankruptcy are \$500. This is a flat fee arrangement, and does not include the court costs, which are currently \$335. This is the total of your attorney fees, and Springer Law Firm will not charge you for additional work. However, if you refuse to cooperate, or fail to provide information as requested by our attorney, your case may be closed.
- 2. Fees paid to the firm become property of the firm upon payment. If before the case is filed, you decide to close out your case, Springer Law Firm will refund you any fees not earned. I assign to Springer Law Firm any amount paid towards court costs and filing fees. I authorize Springer Law Firm to transfer said funds to the firm's operating account if I decide not to file for bankruptcy, or if I breach this contract.
- 3. I agree to disclose all pertinent information to Springer Law Firm, so that the firm can properly disclose all my assets, debts, and financial history to the court. I agree to keep the firm informed on any new assets or debts I may incur from this date forward. If I do not provide the proper information, or do not cooperate with Springer Law Firm, said firm may withdraw from representation, with permission of the court.
- 4. I understand that I may not be able to protect all of my property. The bankruptcy code does not provide exemptions for everything, and as such, some of my property may be taken by the Trustee and sold.

  Additionally, if my income is too high, or if my income is not offset enough by my expenses, I understand that the Trustee may dismiss my case, or require me to file a Chapter 13 instead of a Chapter 7.
- 5. I understand that not all of my debts may be discharged in a Chapter 7 bankruptcy. Student loans, educational debts, undisclosed debt, support/maintenance, fines, debts incurred by fraud, future association/condo HOA dues, certain tax debts, or debts found non-dischargeable by a Judge are among the debts not dischargeable.
- 6. I understand that this retainer agreement is for bankruptcy representation only. Springer Law Firm will not represent me in any other case or legal matter, unless agreed to in a separate retainer agreement. This includes adversary proceedings that may fall under the bankruptcy case. This agreement does not include representation in such adversary proceedings.
- 7. I understand that all money paid towards attorney fees is non-refundable. I understand that once I pay Springer Law, that Springer Law begins work on my case. I understand that the majority of bankruptcy work is done prior to the filing of the case, and because of this the fees are earned even before the filing of the case.
- 8. I understand that before I transfer or sell any property, or incur any new debt, I will first notify Springer Law Firm and consult on the impact such action will have on my bankruptcy.
- 9. I understand that I must take 2 classes pertaining to financial management and credit counselling. Failure to take these courses will result in either my case NOT being filed, or if filed, possibly dismissed. If my case is dismissed, I understand that I will have to pay to have my case re-opened by Springer Law Firm.
- 10. I have received the 11 U.S.C. § 527(a) disclosures and have read them.

| Dated:  | _        |   |
|---|----------|---|
| Signature: \( \int \) Print Name: \( \int \)   Un Ric | <u> </u> | Attorney Signature:  Attorney Print:  10 Spring |

## **United States Bankruptcy Court**Northern District of Illinois

|       |  | Not then District of Infinois           | •                  |                           |
|-------|--|---|--------------------|---------------------------|
| In re | Alan R. Ries                               |   | Case No.           |                           |
|       |  | Debtor(s)                               | Chapter            | 7                         |
|       | VE   | ERIFICATION OF CREDITOR                 | MATRIX             |                           |
|       |  | Number of                               | of Creditors:      | 14                        |
|       | The above-named Debtor(s) (our) knowledge. | ) hereby verifies that the list of cred | litors is true and | correct to the best of my |
| Date: | April 4, 2017                              | /s/ Alan R. Ries                        |                    |                           |

American Express PO Box 981537 El Paso, TX 79998

Barclay's Bank Delaware Attn: Bankruptcy Dept. PO Box 8803 Wilmington, DE 19899

Borrowers First Inc 1114 Lost Creek BV 220 Austin, TX 78746

Capital One Bank USA NA Attn: Bankruptcy Dept. PO Box 30281 Salt Lake City, UT 84130

Equifax PO Box 740256 Atlanta, GA 30374

Experian PO Box 4500 Allen, TX 75013

FNB Omaha Attn: Bankruptcy Dept. POB 3412 Omaha, NE 68197

Ford Motor Credit PO Box 542000 Omaha, NE 68154

Lending Club Corporation 71 Stevenson, Suite 300 San Francisco, CA 94105

Metro Paramedics - Elmhurst PO BOX 1408 Elmhurst, IL 60126 OneMain Financial Attn: Bankruptcy Dept. PO Box1010 Evansville, IN 47706

TransUnion 555 West Adams Street Chicago, IL 60661

Vital Recovery Services, LLC PO BOX 923747 Norcross, GA 30010

Webbnk Attn: Bankruptcy Dept. 6250 Ridgewood Road Saint Cloud, MN 56303